

**Board for Waterworks and Wastewater Works Operators and Onsite Sewage System Professionals**  
**WASTEWATER WORKS OPERATOR LICENSE APPLICATION**  
**Fee \$100.00**

**WASTEWATER OPERATOR APPLICANTS ONLY**

A check or money order payable to the **TREASURER OF VIRGINIA**,  
 or a completed **credit card insert** must be mailed with your application package.  
**APPLICATION FEES ARE NOT REFUNDABLE.**

Select the one class type you are requesting:

License Type	Initial	Trans	Upgrade	Trans
Wastewater Operator - Class 4	<input type="checkbox"/>	1005		
Wastewater Operator - Class 3	<input type="checkbox"/>	1006	<input type="checkbox"/>	5006
Wastewater Operator - Class 2	<input type="checkbox"/>	1007	<input type="checkbox"/>	5007
Wastewater Operator - Class 1	<input type="checkbox"/>	1008	<input type="checkbox"/>	5008

- Provide your **current** or **expired** Virginia **Wastewater** Works Operator license (if applicable):

Virginia License Number 

1	9	6	5						
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 Expiration Date \_\_\_\_\_

1. Full Legal Name (As it appears on your government issued ID or other legal documentation.)

\_\_\_\_\_  
 Last (required) First (required) Middle Generation

2. Provide at least **one** of the following identification numbers\*:

☐ **Social Security Number** and/or

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☐ **Virginia** DMV Control Number

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➤ Enter the same identification number as used on examination, previous applications or licenses on file with the department.

\* State law requires every applicant for a license, certificate, registration or other authorization to engage in a business, trade, profession or occupation issued by the Commonwealth to provide a social security number or a control number issued by the **Virginia** Department of Motor Vehicles.

3. Date of Birth \_\_\_\_\_ (Must be at least 18 years of age.)

MM/DD/YYYY

4. Maiden or Former Name(s) \_\_\_\_\_

5. Mailing Address (PO Box accepted)

The mailing address will be  
 printed on the license.

\_\_\_\_\_  
 City State Zip Code

6. Street Address (PO Box not accepted) ☐ Check here if Street Address is the same as the Mailing Address listed above.

**PHYSICAL ADDRESS REQUIRED**

\_\_\_\_\_  
 City State Zip Code

7. Contact Numbers \_\_\_\_\_

Primary Telephone

Alternate Telephone

Fax

OFFICE USE ONLY	DATE	FEE	TRANS CODE	ENTITY #	FILE #/LICENSE #	ISSUE DATE
					<b>1965</b>	

8. Email Address

Email address is considered a public record and will be disclosed upon request from a third party.

9. Do you hold a current or expired wastewater operator license, certification or registration in any state or jurisdiction within the United States or its territories (excluding Virginia)?

No ☐

Yes ☐ If yes, complete the following table and attach the following:

State/Jurisdiction	Passed National Examination?	License, Certification or Registration Number	Expiration Date
	No <input type="checkbox"/> Yes <input type="checkbox"/>		
	No <input type="checkbox"/> Yes <input type="checkbox"/>		
	No <input type="checkbox"/> Yes <input type="checkbox"/>		

**Required Attachments:**

1. Attach the Out of State Facility Description & Experience Verification Form if you are using out-of-state experience to qualify.
  2. If applicable, applicants who passed the ABC National Examination must attach documentation showing a passing score, date exam completed, and the specific exam(s) passed.
  3. Attach a Certification of Licensure/Letter of Good Standing♦ from each state that you have held a license.
- ♦ Certifications of Licensure/Letter of Good Standing, prepared by the state board or regulatory body must include: 1) the license/certification/registration number; 2) the initial date of licensure; 3) the expiration date of the license or renewal date; 4) the means of obtaining licensure (i.e. exam, reciprocity, etc.); and 5) all closed disciplinary actions resulting in a violation or undetermined finding.

10. Which of the following **education** and **experience** requirements are you using to qualify for the examination?

A. **Class 4 Wastewater Operator applicants only:**

- ☐ Have a high school diploma or equivalent **and** 6 months of experience in a Class 4 facility or higher.

**Required Attachments:** Attach a completed Experience Verification Form.

- ☐ Have a high school diploma **and** hold a **master** alternative onsite sewage system operator license. Provide your license information below:

Virginia License No. 

1	9	4	2						
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 Expiration Date \_\_\_\_\_

**Required Attachments:** Attach a completed Experience Verification Form.

- ☐ Have no high school diploma or equivalent **and** 1 year of experience (with 6 months allowed for substitutions) in a Class 4 facility or higher, or hold a **master** alternative onsite sewage system operator license. Provide your license information below:

Virginia License No. 

1	9	4	2						
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 Expiration Date \_\_\_\_\_

**Required Attachments:** Attach a completed Experience Verification Form.

- ☐ Have no high school diploma **and** at least 1 year of experience as a licensed **master** alternative onsite sewage system operator license. Provide your license information below:

Virginia License No. 

1	9	4	2						
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 Expiration Date \_\_\_\_\_

**Required Attachments:** Attach a completed Experience Verification Form.

B. **Class 3 Wastewater Works Operator applicants only:**

- ☐ Have a bachelor's, master's, or associate's degree **and** 6 months of experience (with 3 months allowed for substitutions) working in a Class 4 facility or higher.

**Required Attachments:** Attach a completed Experience Verification Form **and** an official college transcript.

- ☐ Have a high school diploma or equivalent **and** 1 year of experience (with 6 months allowed for substitutions) in a Class 4 facility or higher.

**Required Attachments:** Attach a completed Experience Verification Form.

- ☐ Have no high school diploma or equivalent **and** 1-1/2 years of experience (with 9 months allowed for substitutions) working in a Class 4 facility or higher.

**Required Attachments:** Attach a completed Experience Verification Form.

C. **Class 2 Wastewater Works Operator applicants only:**

- ☐ Have a bachelor's, master's, or associate's degree **and** 1 year of experience (with 6 months allowed for substitutions) in a Class 3 facility or higher.

**Required Attachments:** Attach a completed **Experience Verification Form** and an official college transcript.

- ☐ Have a high school diploma or equivalent **and** 2 years of experience (with 1 year allowed for substitutions) in a Class 3 facility or higher.

**Required Attachments:** Attach a completed **Experience Verification Form**.

- ☐ Have no high school diploma or equivalent, a Class 3 license, **and** 3 years of experience (with 1-1/2 years allowed for substitutions) in a Class 3 facility or higher.

**Required Attachments:** Attach a completed **Experience Verification Form**.

D. **Class 1 Wastewater Works Operator applicants only:**

- ☐ Have a bachelor's, master's, or associate's degree, a Class 2 license, **and** 1-1/2 years of experience (with 9 months allowed for substitutions) in a Class 2 facility or higher.

**Required Attachments:** Attach a completed **Experience Verification Form** and attach an official college transcript.

- ☐ Have a high school diploma or equivalent, a Class 2 license, **and** 3 years of experience (with 1-1/2 years allowed for substitutions) in a Class 2 facility or higher.

**Required Attachments:** Attach a completed **Experience Verification Form**.

- ☐ Have no high school diploma or equivalent, a Class 2 license, **and** 4 years of experience (with 2 years allowed for substitutions) in a Class 2 facility or higher.

**Required Attachments:** Attach a completed **Experience Verification Form**.

11. **For Class 3, Class 2, or Class 1 applicants only:**

- A. Have you completed any board approved **training** courses, seminars, workshops or similar training relevant to the category and classification of the license being applied for? (Exceptions noted in the Boards regulations 18 VAC 160-30-280.)

No ☐

Yes ☐ If yes, please complete an **Education & Training Substitution Form**.

- B. Have you completed any **education** courses at a post-secondary level in a related physical, biological, environmental, or chemical science; engineering or engineering technology; waterworks or wastewater works operation?

No ☐

Yes ☐ If yes, please complete an **Education & Training Substitution Form**.

- C. Are you requesting any **experience substitution** to qualify for licensure in accordance with 18 VAC 160-30-130 of the regulations?

No ☐

Yes ☐ If yes, please complete an **Experience Verification Form**.

12. Have you ever been subject to a **disciplinary action** taken by any (including Virginia) local, state or national regulatory body?

No ☐

Yes ☐ If yes, complete the [Disciplinary Action Reporting Form](#).

13. A. Have you ever been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of any **felony**?

No ☐

Yes ☐ If yes, complete the [Criminal Conviction Reporting Form](#).

B. Have you been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of any **misdemeanor** within the **last three years** (except marijuana convictions)?

No ☐

Yes ☐ If yes, complete the [Criminal Conviction Reporting Form](#).

14. By signing this application, I certify the following statements:

- I am aware that submitting false information or omitting pertinent or material information in connection with this application will delay processing and may lead to license revocation or denial of license.
- I will notify the Board of any changes to the information provided in this application prior to receiving the requested license, certification, or registration including, but not limited to any disciplinary action or conviction of a felony or misdemeanor (in any jurisdiction).
- I authorize the Department to verify information concerning me or any statement in this application from any person, or any source the department may contact. I also agree to present any credentials or documents required or requested by the Department.
- I authorize any federal, state or local government agency, current or former employer, or other individual or business to release information which may be required for a background investigation.
- I have read, understand and complied with all the laws of Virginia related to this profession under the provisions of Title 54.1, Chapter 23, of the *Code of Virginia* and the *Waterworks and Wastewater Works Operators Licensing Regulations of the Virginia Board for Waterworks and Wastewater Works Operators and Onsite Sewage System Professionals*.

Signature \_\_\_\_\_ Date \_\_\_\_\_