



Automatic Upgrade Application Instructions

Waterworks Operator Certification Program

PLEASE READ INSTRUCTIONS CAREFULLY BEFORE FILLING OUT THE APPLICATION FORM

1. A current, original automatic upgrade application must be submitted. **Copies, electronic documents, faxes, or previous certification applications won't be accepted and will be returned.** You may make copies of blank work history pages and blank affidavit form as needed.
2. Applications must be complete and must include all necessary documentation and signatures. The application must be typed or completed in ink by the applicant.
3. Incomplete applications will be returned.
4. Purchase orders, vouchers, and credit cards won't be accepted for payment of fees.
5. The application fee must accompany the application. Please make your check payable to the Department of Health (DOH).
6. The application fee isn't refundable or transferable.
7. The Automatic Upgrade Application fee is \$87.00.
8. The date this office receives the application will be used to determine the date of the upgrade.
9. Mail the application and fee to:
Waterworks Operator Certification Program
PO Box 1099
Olympia WA 98507-1099
10. The application is for use by the Certification Program only, and all statements in the application are subject to investigation.

If you have any questions, please contact the Certification Program at 360-236-3141 or toll free 1-800-525-2536.

This document is available in other formats for persons with disabilities. To submit a request, please call 1-800-525-0127 (TTY 1-800-833-6388)





WATERWORKS AUTOMATIC UPGRADE APPLICATION FORM

NOTE: WE WON'T ACCEPT COPIES, FAXES, OR PREVIOUS APPLICATION FORMS.

APPLICANT'S NAME _____

FOR OFFICE USE ONLY

Upgrade: _____

Validation Date: _____

Validation No.: _____

Comments: _____

AUTOMATIC UPGRADE CLASSIFICATION: Check the classification(s) and level(s) of certification for which you are requesting upgrade.

WATER DISTRIBUTION MANAGER 1 (WDM 1)	
WATER TREATMENT PLANT OPERATOR 1 (WTPO 1)	

PERSONAL HISTORY

(PLEASE PRINT IN INK OR TYPE)

MR.

1. NAME: MS. _____
(Last) (First) (Middle)

2. CERTIFICATION NUMBER: _____

3. CERTIFICATIONS: _____

4. HOME MAILING ADDRESS: _____
(Street)

_____ (City) (State) (Zip)

5. HOME TELEPHONE: (_____)
(Area Code)

6. EMAIL ADDRESS: _____

7. CELL TELEPHONE (Optional): (_____)
(Area Code)

8. BUSINESS TELEPHONE: (_____)
(Area Code) Extension

- Enclosed appropriate Automatic Upgrade Application and fee (check payable to DOH).
- Enclosed Affidavit of Employment for **each waterworks employer/experience record completed.**
(Copy blank affidavit form as required.)
- Enclosed completed Waterworks Operator Information form.
- Indicated which upgrade you want.
- Completed all personal history items.
- Provided all documentation of your education (if applicable).

Return application with check or money order to:

**Waterworks Operator Certification Program
PO Box 1099
Olympia, Washington 98507-1099**

**PRESENT WATERWORKS EMPLOYER AND POSITION
EXPERIENCE RECORD**

Employer: _____

Employer's Address: _____

Employer's Phone: _____

Supervisor's Name/Title: _____

Your Title: _____

HIRE DATE

_____ *Month* _____ *Year*

The following activities are considered water system operating experience. Please place a check mark in the box beside each activity you perform while in your employment with this system. List the total percentage of time you spend performing all of the activities you checked. NOTE: **O&M = Operation and Maintenance (not Maintenance only).**

Water Treatment Job Duties

- Performance of Laboratory Tests
 - O&M of Coagulant Feed System
 - Calculation of CT Values
 - O&M of Conventional or Direct Filtration System
 - O&M of Fluoride Feed System
 - O&M of Hypochlorination & Gas Chlorination System
 - O&M of Slow Sand Filter
 - O&M of Cartridge, Bag, or Diatomaceous Earth Filter
- List other water treatment duties you perform: _____

Water Distribution Job Duties

- O&M of Storage Tanks
 - O&M of Valves
 - O&M of Cross Connection Program
 - Distribution of System Flushing
 - Installation of Taps/Pipelines/Service Connections
 - Leak Detection/Repairs
 - O&M of Booster Station/Pumps and Motors
 - Water Quality Testing (sampling) (i.e. bacteria, and so on)
- List other water distribution duties you perform: _____

Job Description Type

Percentages & Dates MUST be completed

- Water Distribution Operator (WD) % of the time = _____ Dates of Distribution Duties: _____ to _____
- Water Treatment Operator (WT) % of the time = _____ Dates of Treatment Duties: _____ to _____

- EXPERIENCE TYPE:** Employed as a Waterworks Operator Volunteer Position
- Employed as a Waterworks Contract Operator

Average number of hours spent performing these duties each day: _____

System's Water Facility Inventory I.D. #: _____

Water System Size:

Number of Water Services: _____

Population Served: _____

- Source Type: Surface Water Groundwater
- Type of Water Treatment Plant: Conventional Direct Diatomaceous Earth
- Slow Sand Cartridge Membrane Other _____

Attach Affidavit of Employment for this employer and position

**PREVIOUS WATERWORKS EMPLOYER AND POSITION
EXPERIENCE RECORD**

Employer: _____

Employer's Address: _____

Employer's Phone: _____

Supervisor's Name/Title: _____

Your Title: _____

Year

FINISH DATE _____
Month Year

HIRE DATE _____
Month Year

The following activities are considered water system operating experience. Please place a check mark in the box beside each activity you perform while in your employment with this system. List the total percentage of time you spend performing all of the activities you checked. NOTE: **O&M = Operation and Maintenance (not Maintenance only).**

Water Treatment Job Duties

Water Distribution Job Duties

- Performance of Laboratory Tests
- O&M of Coagulant Feed System
- Calculation of CT Values
- O&M of Conventional or Direct Filtration System
- O&M of Fluoride Feed System
- O&M of Hypochlorination & Gas Chlorination System
- O&M of Slow Sand Filter
- O&M of Cartridge, Bag, or Diatomaceous Earth Filter

- O&M of Storage Tanks
- O&M of Valves
- O&M of Cross Connection Program
- Distribution of System Flushing
- Installation of Taps/Pipelines/Service Connections
- Leak Detection/Repairs
- O&M of Booster Station/Pumps and Motors
- Water Quality Testing (sampling) (i.e. bacteria, and so on)

List other water treatment duties you perform:

List other water distribution duties you perform:

Job Description Type

Percentages & Dates MUST be completed

- Water Distribution Operator (WD) % of the time = _____ Dates of Distribution Duties: _____ to _____
- Water Treatment Operator (WT) % of the time = _____ Dates of Treatment Duties: _____ to _____

- EXPERIENCE TYPE:**
- Employed as a Waterworks Operator
 - Volunteer Position
 - Employed as a Waterworks Contract Operator

Average number of hours spent performing these duties each day: _____

System's Water Facility Inventory I.D. #: _____

Water System Size:

Number of Water Services: _____

Population Served: _____

- Source Type: Surface Water Groundwater
- Type of Water Treatment Plant: Conventional Direct Diatomaceous Earth
- Slow Sand Cartridge Membrane Other _____

Attach Affidavit of Employment for this employer and position