



SWRCB – Division of Financial Assistance-Wastewater Operator Certification Program

Online Payments

Credit Cards or Debit Cards **WILL NOT** be accepted

Only Completed Applications will be processed; those that include payment and a completed application with original signatures.

USER GUIDE
For Wastewater Operators

Updated as of 06/06/2016

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Items Required For Online Payment

- Bank routing number and checking and/or savings account numbers.
- Completed Online Payment Form.
- Application (In order for an application to be complete the WWOCP must receive payment and a mailed completed application including original signatures).

The diagram illustrates a check form with the following fields and labels:

- Organization Name:** 1000 Any Street, Los Angeles, CA 90007, 213-000-2458. Labeled as **Client Information**.
- Bank Name:** 2000 Bank Street, New York City, NY 10001. Labeled as **Bank Information**.
- Check Number:** 8358.
- Date:** _____
- Pay to the Order of:** _____
- Amount:** \$ _____ Dollars.
- MICR Lines:**
 - Check Number:** ⑆ 8 3 5 8 ⑆
 - 9 Digit Bank Routing Number:** ⑆ 1 8 6 3 5 8 8 7 5 ⑆. Labeled as "Starts with ⑆ and ends with ⑆".
 - Account Number:** 8 5 8 7 1 7 1 3 ⑆. Labeled as "ends with ⑆".

[The Wastewater Operator Certification Program \(WWOCP\) website](#)

- Link to the WWOCP homepage:
http://www.waterboards.ca.gov/water_issues/programs/operator_certification/operator_certification.shtml.



→ [Fact Sheet](#) | [New Regulations](#) (posted 4/23/13)

→ As of July 1, 2014, the [Drinking Water Operator Certification Program](#) transitioned from the California State Water Resources Control Board, Division of Financial Assistance. For additional information, see [Frequently Asked Questions](#).

Wastewater Treatment Plant Operator Examination

→ **Application Deadline: August 16, 2016** | **Next Scheduled Exam: October 15, 2016** (Must be

→ [Examination Application](#)

→ [Examination Schedule and Important Information for Examinees](#)

Public Listing of Certified WWTP Operators

→ Provides a list of Certified WWTP Operators by County, Grade Level, etc.

[Search Operator Certification Database](#)

Wastewater Operator Online Payments

Step One: [Online Payment Form](#) (No Credit or Debit Cards)

Step Two: [Online Payment](#)

Disclosure: By clicking on the above link, you will be redirected to the State's data collector website, FIS, which is under the control of the State Water Resources Control Board (SWRCB) and the SWRCB is **NOT** responsible for this website. The SWRCB recommends that you view FIS's security and confidentiality statements.

→ [Online Quick Payment Instruction](#)

→ [Online Payments User Guide](#)

→ [Online Payments FAQ](#)

Contact Information

Wastewater Operator Certification
State Water Resources Control Board
P.O. Box 944212
Sacramento, CA 94244-2120
Phone: (916) 341-5819
Fax: (916) 341-5734
Email: wwopcertprogram@waterboards.ca.gov

(Updated 5/31/16)

[Step One: Complete the Online Payment Form and email it to wwocertprogram@waterboards.ca.gov.](http://wwocertprogram@waterboards.ca.gov)

- Click on 'Wastewater Operator Online Payments', 'Step One Online Form'



State Water Resources Control Board

WASTEWATER OPERATOR CERTIFICATION PROGRAM (WWOCP)
(This form is for Wastewater Operators only)
ONLINE PAYMENT FORM

Application Number: 0 A _____ Application number is OA plus the first four letters of last name and the last four digits of the social security number
(For example, OABROW6789, Last names with less than 4 letters, use 0 as space holders.)

Name: Last: _____ First: _____ Middle: _____ Date of Birth: _____

Mailing Address: _____ Apt. #: _____

City: _____ County: _____ State: _____ Zip: _____

Telephone: Cell: (____) _____ Telephone: Home: (____) _____

E-Mail Address: _____ If Applicable: Certificate Grade: ____ & Number: _____

Payment Information:
 Amount: _____ Date of scheduled payment: _____

- Complete the Contact Information for the applicant.
- If the applicant has an issued certificate number, complete the Certificate Grade and Number section.
- Complete the Payment Information with the amount of the payment and the date of payment.

<p>Application Type: (check which application)</p> <p><input type="checkbox"/> Certification</p> <p><input type="checkbox"/> Contract Operator Credentials</p> <p><input type="checkbox"/> Contract Operator (Initial & Renewal Applications)</p> <p><input type="checkbox"/> Examinations</p> <p><input type="checkbox"/> Exam Waiver (formally known as Reciprocity)</p> <p><input type="checkbox"/> Exemption of Class I WWTP</p> <p><input type="checkbox"/> Operator-In-Training (OIT)</p> <p><input type="checkbox"/> OIT Renewals</p> <p><input type="checkbox"/> Provisional Operator</p> <p><input type="checkbox"/> Renewals</p> <p><input type="checkbox"/> Using Credits on File</p>	<p>Grade Level: (check which grade level)</p> <p><input type="checkbox"/> Grade I \$170 <input type="checkbox"/> Grade II \$230 <input type="checkbox"/> Grade III \$300 <input type="checkbox"/> Grade IV \$340 <input type="checkbox"/> Grade V \$340</p> <p>\$50 X ____ = ____ (\$50 per number of Credentials Request)</p> <p><input type="checkbox"/> \$350 Initial or Renewal of Contract Operators (not to exceed \$1,500)</p> <p><input type="checkbox"/> Grade I \$140 <input type="checkbox"/> Grade II \$180 <input type="checkbox"/> Grade III \$350 <input type="checkbox"/> Grade IV \$440 <input type="checkbox"/> Grade V \$440</p> <p><input type="checkbox"/> \$100</p> <p><input type="checkbox"/> Initial Exemption \$800, <input type="checkbox"/> Renewal \$300</p> <p><input type="checkbox"/> Grade I \$170 <input type="checkbox"/> Grade II \$230 <input type="checkbox"/> Grade III \$300 <input type="checkbox"/> Grade IV \$340 <input type="checkbox"/> Grade V \$340</p> <p><input type="checkbox"/> Grade I \$170 <input type="checkbox"/> Grade II \$230 <input type="checkbox"/> Grade III \$300 <input type="checkbox"/> Grade IV \$340 <input type="checkbox"/> Grade V \$340</p> <p><input type="checkbox"/> \$170</p> <p><input type="checkbox"/> Grade I \$170 <input type="checkbox"/> Grade II \$230 <input type="checkbox"/> Grade III \$300 <input type="checkbox"/> Grade IV \$340 <input type="checkbox"/> Grade V \$340</p> <p>Amount of Credit _____</p>
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- Complete the Application type by selecting the type of application that is being submitted and select with the corresponding grade level.



Applicants must submit/mail the original application to:

Date Application was sent in the mail: _____ 

Mailing Address:

**State Water Resources Control Board
Wastewater Operator Certification
P.O. Box 944212
Sacramento, CA 94244-2120**

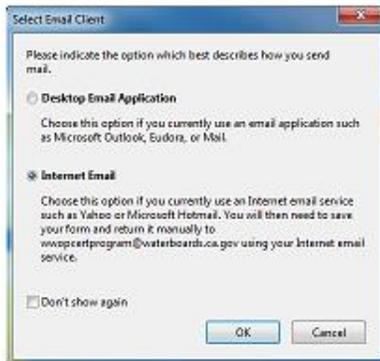
- Write down the date the application was sent in the mail.

To Continue: Please click here 

Credit or Debit Cards WILL NOT be accepted

(Rev 6/15)

- Click on the bottom left hand side, 'To continue'.



- Applicants who use Outlook, or Eudora providers can automatically send in the Payment Information Form to the WWOCP website.
- Applicants who use Gmail, Yahoo, or Hotmail providers will need save the form and then forward it manually to wwopcertprogram@waterboards.ca.gov.

[Step Two: Making a Payment](#)

www.paycalifornia.com

- Click on the Link to the California State Agency Online Payment, 'EFT' Menu
- Click on Application Fees

First Data

California State Agency EFT Menu

Please select a link below to access a payment site.

[Application Fees](#)

[Loan Payments](#)

[Invoices](#)

- Enter the Operator Certification Application Number as:
 - a. "OA" followed by the issued operator certificate number.
 - b. For operators without a certificate number, enter the initials OA followed by the first four alpha characters of the operator's last name, the last four digits of the operators Social Security Number. For example, if the non-certified operator's last name is Jones and the last four numbers of his SSN is 9999 then his SWRCB Application Number is OAJONE9999. Use 0 as space holders for last names with less than 4 letters.
- Enter the amount of the payment.
- Enter the date the charge will be paid from the payee's checking or savings account.

Payment Info	Contact Info	Payment Method	Confirm Payment	Payment Complete
Payment Type : Application Fees				
SWRC Application Number	Invoice Amount	Other Amount	Total Amount	Debit Date (MM/DD/YYYY)
<input type="text"/>	\$ 0.00	\$ 0.00	\$ 0.00	04/12/2016
+ Add Row				
<input type="button" value="Cancel"/> <input type="button" value="Continue"/>				

- Enter the Payee's contact information, email and click Continue.
- If the payee is not representing a business, write in the Contact Name as the Employers Business Name. This field must be completed in order to move to the next step.

First Data. Access the SWRCB website Return to the California EFT System Menu One Time Payment FAQ

Contact Information
Please enter your contact information and click Continue.

Payment Info	Contact Info	Payment Method	Confirm Payment	Payment Complete
Business Name:		Peter & Son Grading		
Contact Name:		Tom Peter		
Address:		101 Wildflower Drive		
City:		Sacramento		
State/Province:		CA <input type="checkbox"/>		
Zip/Postal Code:		95814		
Country:		UNITED STATES <input type="checkbox"/>		
Daytime Phone Number:		9163240126		
Email Address:		peterandson@grad.net		
Re-type Email Address:		peterandson@grad.net		
<input type="button" value="Back"/>		<input type="button" value="Continue"/>		

- Enter in the Bank Account Type, Routing Number, and Account Number.
- Mark the box to authorize payment and click continue.

Payment Info	Contact Info	Payment Method	Confirm Payment	Payment Complete
<p>Routing Number Account Number Check Number</p>				
Account Holder Name:		Tom Peter		
Account Type:		Checking <input type="checkbox"/>		
Account Number:		000111233		
Re-Enter Account Number:		000111233		
Routing Number:		321175261		
<input type="button" value="Back"/>		<input type="button" value="Cancel"/>		<input type="button" value="Continue"/>

- Print this page for your records.

FirstData. [Access the SWRCB website](#) [Return to the California EFT System Menu](#) [One Time Payment](#) [FAQ](#)

Payment Acknowledgement
Please take note of the confirmation number or print this page for your records.

Date: 4/11/2016 Time: 9:49:38 AM  [Print this page](#)

Payment Info Contact Info Payment Method Confirm Payment **Payment Complete**

Payment Type : Application Fees

SWRC Application Number	Invoice Amount	Other Amount	Total Amount	Debit Date	Confirmation number
CAPETED411	\$250.00	\$0.00	\$250.00	04/12/2016	1473

[Step Three: After Payment](#)

- Write the Payment Reference number provided to you on the top left corner of the application.
- Mail the application to:
State Water Resources Control Board
Wastewater Operator Certification
P.O. Box 944212
Sacramento, CA 94244-2120
Contact us if you have questions at: (916) 341-5819, or email us at wwopcertprogram@waterboards.ca.gov.