



Drinking Water Operator Certification Program Online Payment Form Treatment and Distribution Operators – ONLY

If you submitted an online to the Drinking Water Ope confirmation number on yo	rator Ce	ertification Progr					
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		(First 4 letters	s of Last Nar	ne) ((Last 4 digits o	of SS#)	
Last Name:	Middle Initial:		First Name	First Name:			
Address:							
City:				State:	State: Zip:		
Phone Number:				☐ Work	☐ Cell	Home	
Email:				Date of Bir	Date of Birth:		
If applicable, Operator Number:				Grade:	☐ Treatment☐ Distribution		
		Grade 1	Grade 2	Grade 3	Grade 4	Grade 5	
Exam		□ \$50	□ \$65	<u></u> \$100	S130	S \$155	
Re-Exam		□ \$30	□ \$45	☐ \$70	□ \$95	<u></u> \$120	
Certification/Renewal		□ \$70	□ \$80	□ \$120	\$140	□ \$140	
Certification/Renewal (certification discount)	dual	□ \$55	□ \$60	□ \$90	\$105	□ \$105	
Renewal – 1 st Late Fee	☐ \$50 if renewal payment is posted after the Due Date						
Renewal – 2 nd Late Fee Additional \$50 if renewal payment is posted less than 45 days prior to Expiration Date							
Reciprocity		□ \$70	□ \$80	□ \$120			
☐ Other (provide amount / reason):				Replacement	Replacement Certificate		
	Amour	nt of Payment	Data of	Payment	Confirmati	on Number	
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