



Instructions for Payment of Examination Fees

The fees for Level 5 Type II Drinking Water Certification Exams are:

- **D5, F5, or S5 - \$45.00 per exam** (Make Checks Payable to: State of Michigan)
- **Payment by credit card can now be done online at the following website:**
www.thepayplace.com/mi/deq/trainandcertify

Individuals will be charged for all exams applied for and charges will apply upon receipt of the application. The applicant will be responsible for payment of the examination fee.

A certified operator will not be allowed to write an examination for a certification that they currently hold.

Be very specific in what you apply for. No refunds of fees will be given for any reason (such as denials, cancellations, no shows, etc.)

In order to obtain certification, the examination fee must be paid. Notification of examination results will not be made until examination fees are received by the State.

COMPLETED APPLICATIONS, WITH ORIGINAL SIGNATURE AND FEE PAYMENT/ CREDIT CARD RECEIPT, MUST BE MAILED TO THE FOLLOWING ADDRESSES DEPENDENT ON PAYMENT TYPE.

<p>When paying online, please mail a copy of the payment receipt, the ORIGINAL application, and all documentation to this address. DO NOT MAIL CHECKS TO THIS ADDRESS:</p> <p>MDEQ Office of Drinking Water and Municipal Assistance Operator Training and Certification PO BOX 30241 Lansing, Michigan 48909-7741</p>	<p>To pay by check, please mail this application, all documentation and appropriate fees to:</p> <p>Make checks Payable to: State of Michigan</p> <p>MDEQ Office of Financial Management Revenue Control/Cashier's Office PO BOX 30657 Lansing, Michigan 48909-8157</p>	<p>For overnight or express delivery, please send check, application and all documentation to:</p> <p>Make checks payable to: State of Michigan</p> <p>MDOT Accounting Service Center 425 West Ottawa Street Lansing, Michigan 48933</p>
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FAXED, COPIED, OR E-MAILED APPLICATIONS WILL NOT BE ACCEPTED.

ADDITIONAL APPLICATIONS MAY BE DOWNLOADED AT: <http://www.michigan.gov/deqoperatortraining>

You may receive acknowledgment from the Department of Environmental Quality of **receipt of your application** by enclosing a **SELF-ADDRESSED, STAMPED POSTCARD** with your application. We will date stamp the card and mail it back to you. This does not indicate acceptance to the examination; only receipt of your application.

ALL APPLICANTS WILL BE NOTIFIED OF ACCEPTANCE OR DENIAL OF THE WRITTEN EXAMINATION NO LESS THAN 15 DAYS BEFORE THE DATE OF THE EXAMINATION

DO NOT INCLUDE THIS PAGE WITH YOUR SUBMITTED APPLICATION



Michigan Department of Environmental Quality
Office of Drinking Water and Municipal Assistance

**APPLICATION FOR
LEVEL 5 CERTIFICATION**

This information is required by authority of 1976 PA 399.

GENERAL INFORMATION - Provide complete contact information and education information. *Sign the application on page 1. The application must be received not less than 60 days prior to the announced examination date, if paying by credit card 45 days.*

FOR OFFICE USE ONLY		
CLASS	EDUCATION	EXAM GRADE
ISSUE DATE		
EXPIRATION DATE		
CERTIFICATE NUMBER		

TYPE, PRINT, OR WRITE LEGIBLY

NAME: (First) (Middle Initial) (Last)		Operator ID: (If Known)	
ADDRESS: (Number and Street) (Apartment Number)	CITY:	STATE:	ZIP CODE:
E-MAIL ADDRESS:	HOME PHONE NUMBER: () ()	BUSINESS PHONE NUMBER: () ()	
LIST ANY MDEQ DRINKING WATER CERTIFICATE(S) HELD:	CIRCLE CERTIFICATE(S) APPLIED FOR WITH THIS APPLICATION D-5 F-5 S-5		
EMPLOYER (Name)	WSSN NUMBER	PHONE NUMBER () ()	
ADDRESS (Number and Street) (City) (State) (Zip Code)	FAX NUMBER () ()		

CERTIFICATION OF APPLICANT:

I certify that all information provided in this application and attachments (if any) is accurate and complete. I understand that misstatement of facts may result in forfeiture of all rights to certification. I further certify that I have read and understand the instruction for payment of examination fees and I am responsible for an examination fee of \$45 for each exam applied for. I further understand there are **NO REFUNDS**.

SIGNATURE:	DATE:
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EXAMINATION LOCATION: I PREFER TO TAKE THE WRITTEN EXAMINATION NEAR

- CENTRAL MI EAST MI WEST MI UPPER PENINSULA
 NORTHERN LOWER MI SOUTHEAST MI SOUTHWEST MI

Indicate 1st, 2nd, and 3rd choice. If the site you select is full, you will be moved.

It is recommended that you make a copy of the completed application for your records. If you would like confirmation that DEQ-Operator Training & Certification Program received your application; please include a self-addressed & stamped postcard.

Submit completed application form and examination fee of: \$45

When paying online, go to www.thepayplace.com/mi/deq/trainandcertify . Please mail a copy of the payment receipt, the ORIGINAL application, and all documentation to this address. DO NOT MAIL CHECKS TO THIS ADDRESS: MDEQ Office of Drinking Water and Municipal Assistance Operator Training and Certification PO BOX 30241 Lansing, Michigan 48909-7741	To pay by check, please mail this application, all documentation and appropriate fees of \$45.00 to: Make checks Payable to: State of Michigan MDEQ Office of Financial Management Revenue Control/Cashier's Office PO BOX 30657 Lansing, Michigan 48909-8157	For overnight or express delivery, please send check/credit card receipt, application and all documentation to: Make checks payable to(if applicable): State of Michigan MDOT Accounting Service Center 425 West Ottawa Street Lansing, Michigan 48933 For Cashier's Use Only: DWF
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If you do not have a minimum high school diploma or GED equivalent, you may not be eligible to write any of the exams. If you do not meet the minimum education qualifications, please call (517) 284-5424 discuss your options prior to mailing your application and payment.

EDUCATIONAL QUALIFICATIONS							(OFFICE USE ONLY)	
HIGH SCHOOL (Name)	(Location)	CIRCLE HIGHEST GRADE COMPLETED			10	11	12	
HIGH SCHOOL GED or EQUIVALENT	(Name)	(Location)						
OTHER TRAINING AND EDUCATION – (Complete this section only if you DO NOT have a High School Diploma, GED, or Equivalent) List short courses, seminars, regional meetings, correspondence courses, and other MDEQ Advisory Board Approved training. List any other in-service training courses, extension courses, or individual college courses not part of your degree program. Give title of course, location, subject, instructor, and other information necessary for evaluation and determination of credit to be allowed. Indicate credit earned by filling out either the class hour's column or the Continuing Education Credit's (CEC) column. Verification may be required.								
COURSE TITLE	LOCATION	SUBJECT	INSTRUCTOR	YEAR	CLASSROOM HOURS	CEC's		
IF ADDITIONAL SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS OF PAPER HEADED WITH NAME AND DATE								
						TOTAL		

**Authority Governing the Certification of Water Works Personnel
in Accordance with State Law and Administrative Rules**
(Excerpts From the Act and Rules as Amended 12/4/2009)
SAFE DRINKING WATER ACT
Act 399, Public Acts of 1976

AN ACT to protect the public health; to provide for supervision and control over public water supplies; to prescribe the powers and duties of the department of environmental quality, to provide for the submission of plans and specifications for waterworks systems and the issuance of construction permits therefore; to provide for the classification of public water supplies and the examination, certification and regulation of persons operating those systems; to provide for continuous, adequate operation of privately owned, public water supplies; to authorize the promulgation of rules to carryout the intent of the act, and to provide penalties.

Sec. 9 (1) The department shall classify water treatment and distribution systems with regard to size, type, location, and other physical conditions for the purpose of establishing the skill, knowledge, and experience that individuals need to maintain and operate the systems effectively.

(4) For individuals meeting the requirements, the department shall issue certificates acknowledging their competency to operate a specified class of waterworks system or portion thereof. The department may suspend or revoke a certificate as specified by rule.

(5) A water treatment and distribution system shall be under the supervision of a properly certified operator as specified in the rules.

THE RULES TO IMPLEMENT ACT NO. 399, P.A. 1976
R 325.10101 TO R 325.12606

R 325.11901 Classification of treatment systems.

Rule 1901. (1) Complete treatment systems are classified based on population served by the public water supply or rated treatment capacity of the treatment system as follows:

(e) Class F-5: Complete treatment systems for noncommunity supplies.

(2) Limited treatment systems are classified based on population served by the public water supply or rated treatment capacity of the treatment system as follows:

(e) Class D-5: Limited treatment systems for noncommunity supplies.

(3) Waterworks systems that use as a source surface water or ground water under the direct influence of surface water shall be classified as F systems.

R 325.11902 Classification of distribution systems and other public water supplies.

Rule 1902. The following classifications are assigned to public water supplies:

(e) Class S-5: Nontransient noncommunity water supplies with no treatment or community supplies with no treatment and a distribution system limited in extent.

R 325.1195

Rule 1915. (1) The department shall renew a certificate on a 3-year cycle.

(2) To have a Class F-5, Class D-5, or Class S-5 certificate renewed, a certificate holder shall have completed not less than 9 hours of advisory board-approved training or continuing education during the renewal cycle.