

OPERATOR CERTIFICATION EARLY EXAMINATION FORM

Full Name:	Operator			Number OP0:	SSN: (Last Four Digits Only)	
Mailing Address:						
City:	State:			ZIP:		
Work Phone:	Home Phone:			Email:		
Classification and grade	request	ing.		List all current co	ertificates in Arizona a	and other states.
	2	3	4	Certificate	Grade	Issue Date
Water Treatment						
Water Distribution						
Wastewater Treatment						
Wastewater Collection						
 The following must acco Current resume do Copy of your offi Early Examination Check or Cash. (F Your signature below cert 	mpany to cumenticial or urn review R18-14-3 ifies that	this for ing your noffice of the office of the ingular	orm: our work ial transc f \$150.00 Cash mus nformatic	o, payable to ADEQ. Only	tion(s) you are requestition of accepted paymerect. Understand that a	nent are: Money Ordon
Signature				D	ate	
-	Environ	ment	al Quali	l documents to: ty, Operator Certification Phoenix, AZ 85007, Pho	_	

Pursuant to A.R.S. § 41-1030:

¹⁾ ADEQ shall not base a licensing decision, in whole or in part, on a requirement or condition not specifically authorized by statute or rule. General authority in a statute does not authorize a requirement or condition unless a rule is made pursuant to it that specifically authorizes the requirement or condition.

²⁾ Prohibited licensing decisions may be challenged in a private civil action. Relief may be awarded to the prevailing party against ADEQ, including reasonable attorney fees, damages, and all fees associated with the license application.

³⁾ ADEQ employees may not intentionally or knowingly violate the requirement for specific licensing authority. Violation is cause for disciplinary action or dismissal, pursuant to ADEQ's adopted personnel policy. ADEQ employees are still afforded the immunity in A.R.S. §§ 12-821.01 and 12-820.02.