



GAVIN NEWSOM
GOVERNOR



YANA GARCIA
SECRETARY FOR
ENVIRONMENTAL PROTECTION

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

If you submitted an online payment, submit this completed form along with your ORIGINAL application to the Drinking Water Operator Certification Program. Please write "paid online" and your payment confirmation number on your application.

Application Number:	Z - A	-	-	-	-	-	-	-
(First 4 letters of Last Name)				(Last 4 digits of SS#)				

Last Name:	Middle Initial:	First Name:
Address:		
City:	State:	Zip:
Phone Number:	☐ Work ☐ Cell ☐ Home	
Email:	Date of Birth:	
If applicable, Operator Number:	Grade:	☐ Treatment ☐ Distribution

	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5
Exam	☐ \$62	☐ \$81	☐ \$125	☐ \$162	☐ \$193
Re-Exam	☐ \$37	☐ \$56	☐ \$87	☐ \$119	☐ \$150
Certification/Renewal	☐ \$87	☐ \$100	☐ \$150	☐ \$175	☐ \$175
Certification/Renewal (dual certification discount)	☐ \$69	☐ \$75	☐ \$112	☐ \$131	☐ \$131
Renewal – 1st Late Fee	☐ \$62 if renewal payment is posted after the Due Date				
Renewal – 2nd Late Fee	☐ Additional \$125 if renewal payment is posted less than 45 days prior to Expiration Date				
Reciprocity	☐ \$87	☐ \$100	☐ \$150		
☐ Other (provide amount / reason):			Replacement Certificate ☐ \$31		

Payment Info	Amount of Payment	Date of Payment	Confirmation Number

State Water Resources Control Board // Drinking Water Operator Certification Program
P.O. Box 944212, Sacramento, CA 94222-2120
PHONE (916) 449-5611 // EMAIL dwopcertprogram@waterboards.ca.gov

State Water Resources Control Board Privacy Notice on Collection

Civil Code section 1798.17 requires a Privacy Notice on Collection to be provided when personal information is collected. Individuals have the right to review personal information maintained by State Water Resources Control Board and the Regional Water Quality Control Boards (Water Boards) unless access is exempted by law. You may review your records by contacting the official responsible for maintaining your information below. The State Water Resources Control Board (State Water Board) will not disclose your personal information unless authorized by law. To learn more about the Water Boards' Privacy Policy, visit waterboards.ca.gov/privacy.html.

Please do not include any personal information that is not requested.

Authority for Collection of Personal Information

The Drinking Water Operator Certification Program (DWOCP) collects the information requested on the form as authorized by Health and Safety Code, division 104, part 1, chapter 4, article 3, section 106875 et seq. and California Code of Regulations, title 22, division 4, chapter 13, section 63750.10 et seq. (DWOCP Statutes and Regulations).

Principal Purpose for Which the Information Collected is to Be Used

The information will be used to review and approve examination applications, issue and renew certifications to applicants, and ensure compliance with the DWOCP Statutes and Regulations. The information also may be used to ensure compliance with other applicable laws governing drinking water treatment and distribution administered by the Water Boards.

Known or Foreseeable Disclosures of the Information

The DWOCP maintains a searchable list on its website of the name, county on file, certificate type, grade level, certificate number, and the original issue date and expiration date for each certificate held for all certified distribution and water treatment operators.

If you elect to have your information included on the mailing list provided to prospective employers, the DWOCP will provide prospective employers your name and your email, address, and phone number on record. The DWOCP will not include your name and contact info on mailing lists provided to prospective employers unless you elect to be included on these lists.

In addition, please note that pursuant to the California Constitution and the Public Records Act, the State Water Board must disclose its records to the public upon request unless otherwise exempted by law.

Consequences of Not Providing Any or All Parts of the Requested Information

All requested information is required unless marked optional. Failure to provide requested information may result in delays in the application process or the denial of your application.

Official Responsible for Maintenance of Information
Staff Services Manager II

Contact Information for Responsible Official
Office of Operator Certification
P.O. Box 944212, Sacramento, CA, 94244-2120
Email: opcertprogram@waterboards.ca.gov
Phone: (916) 341-5819