



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 <u>ORIGINAL</u> 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 Ini	tial:	F	irst Name:	:		
Address:									
City:					S	tate:	Zip:		
Phone Number:						Work	□ C	ell [_ Home
Email:					D	ate of Birt	h:		
If applicable, Operator Number:					G	rade:] Treatr] Distrit	

	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5
Exam	□ \$50	□ \$65	□ \$100	\$130	☐ \$155
Re-Exam	□ \$30	□ \$45	570	\$ 95	☐ \$120
Certification/Renewal	□ \$70	□ \$80	□ \$120	\$140	□ \$140
Certification/Renewal (dual certification discount)	□ \$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 / rea		Replacemen	t Certificate	□ \$25	

	Amount of Payment	Date of Payment	Confirmation Number		
Payment Info					

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