

# Department of Environmental Quality



## NOTICE

### NEW PROCEDURES FOR OBTAINING AGENCY ISSUED LICENSES/CERTIFICATIONS

Effective November 1, 2007

In order to comply with Oklahoma's new immigration law, 56 Okla. Stat. § 71, the Oklahoma Department of Environmental Quality has established the following new procedures for an individual to obtain an agency-issued license/certification.

- A. In order to obtain a license/certification or to renew an existing license/certification, the documentation requested in Sections C and E, including a signed Affidavit Regarding Citizenship, is required. In the absence of the required documentation, citizenship and immigration status cannot be determined and applicants may not be eligible for the license/certification for which they are applying.
- B. The Department of Environmental Quality will have available notary public services for the Affidavit Regarding Citizenship at no cost to the applicant at the main office located at 707 N. Robinson, Oklahoma City, Oklahoma 73101 during regular business hours (8:00 a.m. – 4:30 p.m. Monday through Friday, except holidays).
- C. The following documents **must** be provided to the agency with the relevant license/certification application in order to establish eligibility:

#### ALL U.S. CITIZENS

1. A signed and notarized Affidavit Regarding Citizenship (see attached affidavit)

#### ALL NON-U.S. CITIZENS:

If you are not a U.S. Citizen, but are a qualified alien under the federal Immigration and Nationality Act and are lawfully present in the U.S. to work, please provide one of the documents listed in Section E, along with the Affidavit Regarding Citizenship.

- D. The Oklahoma Department of Environmental Quality participates in the Systematic Alien Verification for Entitlements (SAVE) Program, which is an intergovernmental information-sharing initiative designed to aid in determining a non-citizen applicant's immigration status (lawful presence), and thereby ensuring only eligible non-citizens receive government benefits, such as licenses/certifications.
- E. The Oklahoma Department of Environmental Quality will only issue licenses/certifications to Qualified Aliens (non-U.S. citizens) who present valid documentary evidence of one (1) of the following:
  - Unexpired foreign passport, with I-551 stamp, or attached Form I-94 indicating unexpired employment authorization;
  - Permanent Resident Card or Alien Registration Receipt Card with photograph (Form I-151, or I-551);
  - Unexpired Temporary Resident Card (Form I-688);

- Unexpired Employment Authorization Card (Form I-688A)
- Unexpired Reentry Permit (Form I-327);
- Unexpired Refugee Travel Document (Form I-571);
- Unexpired Employment Authorization Document issued by Department of Homeland Security (“DHS”) containing a photograph (Form I-688B);
- Valid unexpired immigrant or non-immigrant visa status for admission into the United States;
- Pending or approved application for asylum in the United States;
- Pending or approved application for temporary protected status in the United States;
- Approved deferred action status (Aliens whose deportation is being withheld under (1) § 243(h) of the Immigration and Nationality Act (“INA”) as in effect prior to April 1, 1997 or (2) § 241(b)(3) of the INA;
- Pending application for adjustment of status to legal permanent resident or conditional resident status. (Aliens granted conditional entry under § 2039 (a)(7) of the INA before April 1, 1980). (Upon approval, the applicant may be issued a temporary license/certification for the period of time of the authorized stay in the U.S., or if there is no definite end to the period of authorized stay, then for period of one (1) year);
- Cuban and Haitian Entrants, as defined in § 501(e) of the Refugee Education Assistance Act of 1980;
- Aliens granted parole for at least one year under § 212(d)(5) of the INA;
- Battered aliens, who meet the conditions set forth in § 431(c) of Personal Responsibility and Work Opportunity Reconciliation Act (“PRWORA”) as added by § 501 of the Illegal Immigration Reform and Immigrant Responsibility Act of 1996, P.L. 104-208 (IIRIRA), and amended by § 5571 of the Balanced Budget Act of 1997, P.L. 105-33 (BBA), and § 1508 of the Violence against Women Act of 2000, P.L. 106-386. Section 431(c) of PRWORA, as amended, is codified at 8 U.S.C. 1641(c);
- Victims of a severe form of trafficking, in accordance with § 107(b)(1) of the Trafficking Victims Protection Act of 2000, P.L. 106-386.

**F. Complying with the above requirements does not guarantee issuance of a license/certification. Applicants must still satisfy all other required qualifications of the respective licenses/certifications for which they are applying.**

**G. RENEWALS:**

Effective November 1, 2007, all applicants will be required to present the documentation listed in Sections C and E to establish eligibility. All licenses/certifications may be renewed upon expiration by, in addition to satisfying any other preconditions required by the particular license/certification, mailing a renewal application and any applicable renewal fee. For renewal applicants that have already demonstrated citizenship by satisfying the requirements set forth in Section C above in his/her original application or a prior renewal application, the applicant shall not be required to resubmit such documentation. For renewal applicants that identify themselves as a “qualified alien lawfully present” in the Affidavit Regarding Citizenship, the documents listed in Section E must be resubmitted to the Oklahoma Department of Environmental Quality with the renewal application in order to demonstrate that the applicant’s lawful status has not changed.



The Oklahoma Department of Environmental Quality  
**INSTRUCTIONS for OPERATOR CERTIFICATION EXAM APPLICATION**

1. If you are applying for certification as water, wastewater or laboratory operator by **RECIPROCITY** from another state. Please fill out this section along with the rest of the application.

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2. List the **CLASS #, CITY** and **DATE** of the **EXAM** you wish to take. For DEQ proctored exams; **check (X)** the box indicating if you are choosing an online exam or a written exam. Exam dates may be found in the current "MAIN EVENT" newsletter, or the Operator Certification website at [www.deq.state.ok.us/WQDnew/opcert/index.html](http://www.deq.state.ok.us/WQDnew/opcert/index.html).

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3. Print your **NAME, MAILING ADDRESS, CITY, STATE**, etc. Your **BIRTHDATE** and **SOCIAL SECURITY NUMBER** must be shown. The **MAILING ADDRESS** must be the **OPERATOR'S ADDRESS**.

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4. List **YOUR JOB TITLE**: (Water Plant Supt, Wastewater Plant Supt, Water Plant Operator, etc).  
**LICENSE NUMBER**: If you are an Operator, Temporary operator or Helper in the State of Oklahoma, your **LICENSE NUMBER** may be found on the pocket card you are to carry with you at all times. If you are not certified, leave the space blank and a number will be assigned to you.  
**DO YOU SUPERVISE OTHER EMPLOYEES?** Answer yes or no. **IF YES**, list the number of employees you supervise. Please list the **NAME OF YOUR SUPERVISOR** and his/her **LICENSE NUMBER**.

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5. List your **PLACE OF EMPLOYMENT'S NAME, ADDRESS, CITY, STATE**, etc.

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6. **EMPLOYER'S WATER FACILITY / SEWER FACILITY ID NUMBERS**: The Water Facility Number is a seven-digit **NUMBER** and the Wastewater Facility **NUMBER** usually has 5 digits. These numbers identify the type of system. They can be obtained from your Supervisor or Employer.

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7. **CHECK (X)** the box on the left of the exam you wish to take. Be sure to notice that there are separate boxes for water and wastewater.

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8. List your **EXPERIENCE** in Water, Wastewater, Laboratory, or Distribution/Collection which will be used to qualify for this examination. Be sure to list "**TO**" and "**FROM**" dates as well as **DESCRIBE YOUR DUTIES**. Make sure to list the required amount of experience for the exam you wish to take. A chart of requirements for each exam is located at the bottom of the first page of the exam application.  
**NOTE**: It is important to update this information each time you apply. **DO NOT** rely on this office to maintain the information. The regulation states this is the responsibility of the Operator.

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9. **TRAINING CREDIT** - Please read carefully and enter **TITLE, LOCATION, DATES, HOURS** and **CLASS NUMBERS** as requested. Be sure to list any training you will be taking prior to the exam. Make sure to list the required amount of training for the exam you wish to take. A chart of requirements for each exam is located at the bottom of the first page of the exam application. **THE TRAINING CREDIT SECTION CANNOT BE LEFT BLANK.** Submit verification of required training, Academic Transcripts, Attendance Records, etc.  
**NOTE**: It is important to update this information each time you apply. **DO NOT** rely on this office to maintain the information. The regulation states this is the responsibility of the Operator.

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10. Read the "**STATEMENT OF UNDERSTANDING**", **SIGN, DATE. Must be the Applicant's Signature.**

**FEES**: The application fee is a **non-refundable, nontransferable fee of \$62 per exam**.

Please choose form of payment on the **PAYMENT FORM** located at the bottom of page 3 of the exam application.

Make your check or money order payable to: Dept of Environmental Quality and mail it with the exam application to:

**DEPT OF ENVIRONMENTAL QUALITY  
FINANCIAL & HUMAN RESOURCES  
OKLAHOMA CITY, OK 73101-2036**

**PO BOX 2036**

**As of September 10, 2009, faxed applications CAN be accepted. A purchase order, or credit card number MUST be included and the application must meet the 3 weeks prior deadline. Please use fax number (405)702-7120.**

The application must be postmarked or faxed at least **THREE** weeks prior to the date on which you wish to take the exam.

- √ Check your application to make sure that you have completed all blanks. If any information is not listed, your application is subject to being returned and not being approved.
- √ If you need assistance contact the operator certification section at (405) 702-8100.
- √ After you submit your exam application, you will receive a letter regarding approval/disapproval. If your application is returned to you with a disapproval letter, please make corrections and resubmit your application.

**YOU ARE NOT APPROVED TO TAKE AN EXAM UNTIL YOU RECEIVE A LETTER OF APPROVAL FROM DEQ.**

The Oklahoma Department of Environmental Quality  
**OPERATOR CERTIFICATION EXAM APPLICATION**

Class ___ Water	Exam - score _____ %	Class ___ Water lab	Exam - score _____ %
Class ___ Wastewater	Exam - score _____ %	Class ___ Wastewater lab	Exam - score _____ %
Class ___ Dist/Coll	Exam - score _____ %		

**THIS BOX FOR DEQ USE ONLY    Project ID 292010911**

**PLEASE RETURN THE APPLICATION AND APPLICATION FEE TO:  
 Must be postmarked or faxed 3 weeks prior to exam date.**

Dept. of Environmental Quality  
 Financial & Human Resources  
 PO Box 2036  
 Oklahoma City, OK 73101-2036  
 Or: Fax # 405-702-7120

**Incomplete or incorrect applications may be returned.**

**PAYMENT INFORMATION**

Payment **must** be included with this application, or the application cannot be processed.  
 The **NON-REFUNDABLE, NON –TRANSFERRABLE** application fee is \$62.00  
 A payment form is located on page 3 of the application.

1. Certification by Reciprocity? \_\_\_\_\_ From which State? \_\_\_\_\_ Level: \_\_\_\_\_

2. Exam You Wish to Take: Class #: \_\_\_\_\_ Exam City: \_\_\_\_\_ Exam Date: \_\_\_\_\_ Online \_\_\_\_\_ Written \_\_\_\_\_

3. Name - Last: \_\_\_\_\_ First: \_\_\_\_\_ MI: \_\_\_\_\_

Mailing Address \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Social Security #\* \_\_\_\_\_

\*\*\*Pursuant to OAC 710:95-9-3(a), DEQ must provide to the Oklahoma Tax Commission ("OTC") a list of all its licensees along with their social security numbers and other identifying information that may be required by OTC.

Birth date: \_\_\_\_\_ Home phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

4. Your Job Title: \_\_\_\_\_ DEQ License #: \_\_\_\_\_

Do you supervise other operators/helpers? \_\_\_\_\_ How many? \_\_\_\_\_

Name of Immediate Supervisor: \_\_\_\_\_ Supervisor's License #: \_\_\_\_\_

5. Employer: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Office Phone: \_\_\_\_\_

Employer Fax: \_\_\_\_\_

6. Water Facility ID #: \_\_\_\_\_ Wastewater Facility ID#: \_\_\_\_\_

7. Place an X in the box to the left of the exam or exams you are applying for.

Water		Wastewater		Required Training	Required Operational Experience
<input type="checkbox"/>	D (100050)	<input type="checkbox"/>	D (100117)	16 hours	None
<input type="checkbox"/>	C (100051)	<input type="checkbox"/>	C (100118)	36 cumulative hours	1 year
<input type="checkbox"/>	B (100119)	<input type="checkbox"/>	B (100121)	100 cumulative hours	3 years
<input type="checkbox"/>	A (100120)	<input type="checkbox"/>	A (100122)	200 cumulative hours	5 years
<input type="checkbox"/>	C LAB (100123)	<input type="checkbox"/>	C LAB (100124)	32 hours of C lab training *	None
<input type="checkbox"/>	B LAB (100125)	<input type="checkbox"/>	B LAB (100126)	32 hours C lab training & 32 hours B lab training	6 months
<input type="checkbox"/>	A LAB (100127)	<input type="checkbox"/>	A LAB (100128)	32 hours B lab training	5 years**

**Distribution / Collection**

<input type="checkbox"/>	Operator (100129)	36 cumulative hours	1 year
<input type="checkbox"/>	Technician (100130)	8 hours	None

\* An Associates Degree or greater Associates Degree in chemistry, microbiology, instrumental analysis or other field of approved science approved by the DEQ may be substituted for the 32 hours of DEQ approved C level training.

\*\* Only 3 years of laboratory experience required with an Associates Degree in chemistry, microbiology, instrumental analysis or other field of approved science approved by the DEQ.

\*\* OR 1 year of laboratory experience required with a Bachelor of Science degree in chemistry, microbiology, instrumental analysis or other field of science approved by the DEQ.

The Oklahoma Department of Environmental Quality  
**OPERATOR CERTIFICATION EXAM APPLICATION**

8. Experience: List your experience in water and/or wastewater system operations or maintenance. **YOU MUST LIST AT LEAST THE REQUIRED AMOUNT OF EXPERIENCE FOR THE LEVEL OF EXAM YOU WISH TO TAKE.** You can find the required amount of experience for each level in the chart at the bottom of the first page. List your present job first. Attach additional sheets if needed.

1.	To:	From:	Name of Employer:			
Employer Address:			City:	State:	Zip:	
Describe your duties in detail:						

2.	To:	From:	Name of Employer:			
Employer Address:			City:	State:	Zip:	
Describe your duties in detail:						

3.	To:	From:	Name of Employer:			
Employer Address:			City:	State:	Zip:	
Describe your duties in detail:						

9. Training Credit: Please list all water and/or wastewater classes you have attended and/or will be attending prior to the exam. **YOU MUST LIST AT LEAST THE REQUIRED AMOUNT OF TRAINING FOR THE LEVEL OF EXAM YOU WISH TO TAKE.** You can find the required amount of training for each level in the chart at the bottom of the first page. Applicants requesting credit for technical school or college hours must attach an official transcript for credit to be granted.

**If you are planning to take an online exam you must complete the associated training class held immediately before the exam. You must list that training class below.**

**THIS SECTION CANNOT BE LEFT BLANK**

CLASS TYPE AND CITY	CLASS DATES	TRAINING HOURS	CLASS #
HIGHEST DEGREE COMPLETED		TOTAL HOURS APPROVED TRAINING	

10. Statement of understanding: I hereby certify under penalty of law that this application and any attachments contain no willful or negligent misrepresentation or falsification and that all information is true, accurate and complete. I understand that any misrepresentation or falsification may result in rejection of my application or in revocation of any certificate issued as a result of this application.

SIGNATURE OF APPLICANT:

DATE:

<b>PLEASE CHOOSE FORM OF PAYMENT</b>		
APPLICATION CANNOT BE PROCESSED WITHOUT PAYMENT.		
CHECK ENCLOSED	MADE PAYABLE TO DEQ	CHECK #
MONEY ORDER ENCLOSED	MADE PAYABLE TO DEQ	MONEY ORDER #
PURCHASE ORDER		PURCHASE ORDER #
CREDIT CARD: MUST BE VISA OR MASTERCARD	SIGNATURE:	
EXPIRATION DATE:	CREDIT CARD #:	