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(e) 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.
AFFIDAVIT REGARDING CITIZENSHIP

I, _________________________________ (Print name) swear under a penalty of perjury, that I am

(Check one) _________ a United States citizen; or

___________ a qualified alien lawfully present in the United States, and I authorize the United States Department of Homeland Security to release my citizenship and immigration Oklahoma Department of Environmental Quality in order to be eligible to receive the benefit/license/certification for which I am applying*

________________________________________
Signature License/certification Applicant

* Any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in this affidavit shall be subject to criminal penalties applicable in the State of Oklahoma for fraudulently obtaining a public assistance program benefit (a license/certification). If the affidavit constitutes a false claim of U.S. citizenship under 18 U.S.C. Section 911, a complaint will be filed by the Oklahoma Department of Environmental Quality with the United States Attorney for the applicable district based upon the venue in which the affidavit was executed.

ACKNOWLEDGEMENT

State of ______________________________
) ss:
County of ____________________________

Subscribed and sworn to before me this _________ day of __________, 20____.

___________________________
Notary Public

My Commission expires:________________________
1. List the CITY and DATE of the EXAM you wish to take. Check (X) the box indicating if this is 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.

2. 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!

3. 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.

4. List your PLACE OF EMPLOYMENT’S NAME, ADDRESS, CITY, STATE, etc.

5. 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.

6. 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.

7. 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.

8. 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.

9. 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 for which you are applying. 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 affidavit of citizenship must have an ink notary stamp.

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.
✓ Application must be submitted on a current DEQ form.

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

PLEASE RETURN THE APPLICATION AND APPLICATION FEE TO: Dept. of Environmental Quality
Financial & Human Resources
PO Box 2036
Oklahoma City, OK 73101-2036
Or: Fax # 405-702-7120

Incomplete or incorrect applications, or applications submitted on an outdated form may be returned.

PAYMENT INFORMATION

| Payment must be included with this application. The non-refundable and non-transferable application fee is $62.00 per exam for which you are applying. This is an application processing fee and is incurred at the time of application. |

1. Exam #: Location: Date: 

2. Last name: First name: MI: 

Mailing address: City: State: Zip: 

Social Security #: Birthdate:

3. Job Title: License #: 

Do you supervise other operators or helpers If yes, how many? 

Name of Immediate Supervisor Supervisor’s License 

4. Employer: Address: City: State: Zip: Office Phone: Fax: 

5. Water Facility ID: Wastewater Facility ID: 

6. Please place an X in the box to the left of the exam(s) you are applying for. 

<table>
<thead>
<tr>
<th>WATER</th>
<th>WASTEWATER</th>
<th>REQUIRED AMOUNT OF TRAINING</th>
<th>REQUIRED EXPERIENCE</th>
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<tbody>
<tr>
<td>D (100050)</td>
<td>D (100112)</td>
<td>16 hours</td>
<td>None</td>
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<td>C (100021)</td>
<td>C (100136)</td>
<td>36 hours</td>
<td>1 year</td>
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<tr>
<td>B (100116)</td>
<td>B (100121)</td>
<td>100 hours</td>
<td>3 years</td>
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<tr>
<td>A (100126)</td>
<td>A (100122)</td>
<td>200 hours</td>
<td>5 years</td>
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<tr>
<td>C LAB (100123)</td>
<td>C LAB (100124)</td>
<td>32 hours of C lab training *</td>
<td>None</td>
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<tr>
<td>B LAB (100125)</td>
<td>B LAB (100126)</td>
<td>32 hours of C lab training * &amp; 32 hours of B level lab training</td>
<td>6 months</td>
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<tr>
<td>A LAB (100127)</td>
<td>A LAB (100128)</td>
<td>32 hours of B lab training</td>
<td>5 years **</td>
</tr>
</tbody>
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DISTRIBUTION / COLLECTION

| OPERATOR (100129) | 36 hours | 1 year |
| TECHNICIAN (100130) | 8 hours | None |

* An Associates Degree or greater in chemistry, biology, engineering, physical science, hydrology, geology, math, env. science, microbiology, toxicology, or civil, chemical, sanitary or env. engineering may be substituted for the 32 hours of DEQ approved C level training.

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

Exam Application Continued on Page 2
7. 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. From_______ To_______ Name of Employer____________________________________________
   Employer’s Address________________________________ City________________ State____ Zip____
   Describe your duties in detail: __________________________________________________________
   __________________________________________________________________________________
2. From_______ To_______ Name of Employer____________________________________________
   Employer’s Address________________________________ City________________ State____ Zip____
   Describe your duties in detail: __________________________________________________________
   __________________________________________________________________________________

8. 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**

<table>
<thead>
<tr>
<th>Class Title and Location</th>
<th>Class Date(s)</th>
<th>Training Hours</th>
<th>Class Number</th>
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   Total hours approved training _________________

   Highest high school grade or college degree completed: ______________________

9. **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 __________________

Payment page located on Page 3
### PLEASE CHOOSE FORM OF PAYMENT

APPLICATION CANNOT BE PROCESSED WITHOUT PAYMENT.

<table>
<thead>
<tr>
<th>Payment Method</th>
<th>Payee</th>
<th>Reference Number</th>
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<tbody>
<tr>
<td>CHECK ENCLOSED</td>
<td>MADE PAYABLE TO DEQ</td>
<td>CHECK #</td>
</tr>
<tr>
<td>MONEY ORDER ENCLOSED</td>
<td>MADE PAYABLE TO DEQ</td>
<td>MONEY ORDER #</td>
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<tr>
<td>PURCHASE ORDER</td>
<td></td>
<td>PURCHASE ORDER #</td>
</tr>
<tr>
<td>CREDIT CARD: MUST BE VISA OR MASTERCARD</td>
<td>SIGNATURE:</td>
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<th>Expiration Date:</th>
<th>Credit Card #:</th>
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