

Section B: To be completed by the Verifier.

Verifier - This section is to be completed by the applicant's supervisor or other individual in responsible charge at the facility or employer's company listed in Section A4. For applicants who are self employed (Sole Proprietor), work experience must be verified by an independent third-party who has first-hand knowledge of the applicant's experience.

Complete questions #12 - #20. Return for inclusion in his/her application package. Your prompt response is appreciated.

12. Was the applicant's experience gained at a **Waterworks Facility**?
- No
- Yes If yes, provide the following information:
- A. Facility VDH Permit Number: Facility Class _____
- B. If facility has been reclassified, provide the date of reclassification: _____

13. Was the applicant's experience gained at a **Wastewater Works Facility**?
- No
- Yes If yes, provide the following information:
- A. Facility DEQ Permit Number Facility Class _____
- B. If facility has been reclassified, provide the date of reclassification: _____

14. Was the applicant employed during the time period indicated in Section A.7?
- No If no, clarify the dates: _____
- Yes

15. Was the applicant's experience during his/her employment period **solely** limited to the **operation and maintenance** of wastewater collection systems and water distributions systems, laboratory work, plant maintenance, and other nonoperating duties?
- Yes If yes, these duties shall **not** be counted as experience as an operator or as an operator-in-training.
- No If no, specify the applicant's duties below.

16. Was the applicant's experience during his/her employment period limited to **water distribution system** operation and maintenance?
- No
- Yes If yes, the applicant's experience shall be only considered when applying for a Class 5 or Class 6 waterworks operator license.

17. Was the applicant's experience during his/her employment period related to the **operation and maintenance of Alternative Onsite Sewage Systems**?
- No
- Yes If yes, the applicant's experience shall be only considered when applying for a Class 4 wastewater works operator license.

18. Verifier's Name/Supervisor's Name & Title _____

19. Certifying Supervisor's Virginia Operator License No. (if applicable):

Virginia License Number Expiration Date _____

20. I certify that the applicant has met the experience requirements of [18 VAC 160-30-90](#) of the Board for Waterworks and Wastewater Works Operators and Onsite Sewage System Professionals Regulations and that, to the best of my knowledge, all information provided on this form is true and accurate.

Certifying Supervisor's Signature _____ Date _____

or

Verifier's Signature _____ Date _____