

APPROVED FOR CLASS IV TEST LOCATION: North Little Rock TEST DATE _____

____ \$40 PREPAID TEST FEE ____ \$20 PREPAID RETEST FEE APPROVED BY: _____

SCORE: _____ PASS / FAIL GRADED BY: _____ DATE: _____
(ADEQ Staff)

*****IMPORTANT NOTICE*****

In accordance with Regulation 3, all fees must be paid and an application approved no less than 5 business days prior to the test date. Therefore, it is IMPORTANT TO NOTE: To avoid missing the deadline we recommend submitting applications and checks for exam fees 20 business days prior to the test date to allow for processing.

**ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY
APPLICATION FOR CLASS IV WASTEWATER LICENSE**

Please print clearly (Black or Blue Ink / Not in Pencil) Current Date: _____

APPLYING FOR TEST ON (DATE) _____

Name: _____ (As you would like it to read on your certificate)

Social Security Number: _____ - _____ - _____
(Required by Act 1163 of 1997 and to be reported to AR Office of Child Support Enforcement)

Employer: _____

Business Mailing Address: _____

City, State, Zip code: _____

Business Phone: _____ Fax Number: _____
(Area Code)

Home Mailing Address: _____

City, State, Zip code: _____

Home Phone: _____
(Area Code)

Email: _____

License number: _____ Date Class III Issued: _____

Years of Wastewater Experience _____ Years of Supervisory Experience _____

Attach a resume of employment history for the past 10 years (or provide on reverse side).

Total Training Hours Documented in Wastewater Database: _____

The information provided above is true and correct to the best of my knowledge.

Signature: _____ Date: _____

Please return completed forms (resume included) along with \$40 test fee or \$20 retest fee and **make your checks payable to "ADEQ / WWL"** at the following address:

ADEQ / WWL (WasteWater Licensing Section)
ATTN: Sandy Luttrell
5301 Northshore Drive
North Little Rock, AR 72118

Any questions please call: Sandy #501-682-0998
Fax number (501) 682-0880 to "**ATTN: WWL**"