Application for Approval as a Contract Operation Company or Contracted Professional Operator

Ohio Environmental Protection Agency
Division of Drinking and Ground Waters
Operator Certification Unit
50 West Town St, Suite 700
P.O. Box 1049
Columbus, OH 43216-1049

Phone: (614) 644-2752
1-866-411-OPCT (6728)
Fax: (614) 644-2909
email: opcert@epa.state.oh.us
website: http://www.epa.ohio.gov/ddagw/opcert.aspx

I. CONTACT INFORMATION

Date: __________________________

Company Name/Professional Operator Name: __________________________

Phone Number: __________________________

Emergency Number: __________________________

E-Mail: __________________________

Address, City, State, Zip: __________________________

Owner/Profession Operator (Print) __________________________

Owner/Professional Operator (Signature*) __________________________

II. SERVICES & AREAS PROVIDED

<table>
<thead>
<tr>
<th>Water Supply</th>
<th>Water Distribution</th>
<th>Wastewater Treatment</th>
<th>Wastewater Collection</th>
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District/Counties of Service: __________________________________________

III. OPERATOR EMPLOYEE INFORMATION (if applicable)

<table>
<thead>
<tr>
<th>Operator</th>
<th>Drinking Water Certification Number</th>
<th>Drinking Water Expiration</th>
<th>Wastewater Certification Number</th>
<th>Wastewater Expiration</th>
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*By signing this document, I acknowledge the following: I have read and understand the responsibilities of a contract operations company/contract operator as described in Chapter 3745-7-21 (B) of the Ohio Administrative Code (OAC).

Attach a sample contract that meets the requirements of OAC Rule 3745-7-21.