



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			
Water Supply	Water Distribution	Wastewater Treatment	Wastewater Collection
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
District/Counties of Service: _____			

III. OPERATOR EMPLOYEE INFORMATION (if applicable)				
Operator	Drinking Water Certification Number	Drinking Water Expiration	Wastewater Certification Number	Wastewater Expiration

***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.

For Internal Use Only	
Reviewed by:	Date of SDWIS update:
Date of Compliance Status Letter:	