



**Illinois**  
Environmental Protection Agency



Illinois EPA – Operator Certification  
BOW/CAS#19  
1021 North Grand Avenue East, PO Box 19276  
Springfield, Illinois 62794-9276 Telephone 217-785-0561

**OPERATOR TRAINING FORM**

Operator Name *(please print)*

Water Operator 9-digit ID Number (not Social Security Number)

*Course ID Number  20341	Name of Company or Organization Providing Training  Patrick Hill, Triplepoint		Course Training Name  WWT Lagoon Masterclass: Biosolids Impacts & Measurement
Date(s) of Training  06/12/2024	Hours/Minutes  1 HOUR	City (Where Training Occurred)  <a href="https://register.gotowebinar.com/register/1685882716895192156">https://register.gotowebinar.com/register/1685882716895192156</a>	
Provide summary of wastewater/drinking water related training: This hour-long webinar describes the problems associated with biosolids (sludge) accumulation, signs it needs to be removed, and how to measure sludge and calculate sludge volume			

*\*Effective 7/1/2012, you must include Course ID Number on this form or it will be returned. Until 7/1/2012, if not known, leave blank.*

I certify that the above information is true and accurate and that I have successfully completed the above listed training. I understand that proof of training records must be maintained by me for a period of four years. I further acknowledge that falsification of this form or any form used in the certificate renewal process may result in denial of certificate renewal or restoration and is a cause of certificate revocation and/or suspension. Any person who knowingly makes a false, fictitious, or fraudulent material statement, orally or in writing, to the Illinois EPA commits a Class 4 felony. A second or subsequent offense after conviction is a Class 3 felony. (415 ILCS 5/44(h))

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_