

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



Operator Name (please print)	OPERATOR TRAINING FORM  Water Operator 9-digit ID Number (not Social Security Number)		
*Course ID Number	Name of Company or	r Organization Providing Training	Course Training Name
20754	Environmental Prote Technical Assistance	ection Agency's (EPA) Water e (WaterTA)	DCT/ Helping Communities Address Their Water Challenges
Date(s) of Training	Hours/Minutes	City (Where Training Occurred)	·
09/10/2024	1 HOUR	Virtual - https://usepa.zoomgov.com/webinar/register/WN_BiJSc4WcQHqXh_Y6IUDQrg#/registration	
	sunnort to tind solutions to	a thair drinking water wastewater and stormw	
•		o their drinking water, wastewater, and stormwer on this form or it will be returned. Until 7/1	
*Effective 7/1/2012, you must  I certify that the above inform maintained by me for a period certificate renewal or restorati	include Course ID Number ation is true and accurate a of four years. I further acon and is a cause of certifi	and that I have successfully completed the aborance revocation and/or suspension. Any perso	