

State of Nevada / Nevada Water Environment Association

Application for Replacement/Duplicate Certificate

PROGRAM: Treatment Plant Operator Quality Analyst Industrial Waste Inspector
 Industrial Waste Operator (P/C) Industrial Waste Operator (B) Collection System Operator

Name _____ Certificate Number _____

Grade _____ Expiration Date _____

Address _____

Renew my certificate Cancel my certificate Send application for upgrading

INSTRUCTIONS:

Please complete this form and return with a **\$20** non-refundable check or money order made payable to **NWEA** (Nevada Water Environment Association).

Please provide the following information to help us stay in contact with you:

Email: _____ Phone: _____ Fax: _____

Mailing Address (if changed from above): _____

Present Employer _____

Employer Address _____

Present Job Title _____ Date of Hire _____

YES, you may release my personal information.

NO, please do not release my personal information.

Signature _____ **Date** _____

Mail this form and your \$20 payment to:

**NWEA
P.O. Box 190
Smith, NV 89430**

FOR OFFICE USE ONLY:

Check # _____
Date Received _____
Database Updated _____
Renewal Mailed _____

To contact us:

Hotline: 775-465-2045
E-mail: jennifernwea@yahoo.com
Web Site: www.nvwea.org