

**ALABAMA ONSITE WASTEWATERBOARD
APPLICATION FOR 2017 LICENSE**

THIS PAGE TO BE COMPLETED BY THE LICENSE APPLICANT

TYPE OF LICENSE APPLYING FOR:

Basic Level Installer_____ Manufacturer_____ Pumper_____

Portable Toilet License_____ Advanced Level I Installer_____ Advanced Level II Installer_____

PERSONAL INFORMATION

LAST NAME_____FIRST NAME_____MI_____

HOME ADDRESS_____PHYSICAL ADDRESS_____

CITY_____STATE_____COUNTY_____ZIP CODE_____

HOME PHONE #:_____SOCIAL SECURITY #_____DOB_____

BUSINESS INFORMATION

NAME OF BUSINESS FOR WHICH YOU WILL PERFORM ONSITE WASTEWATER SYSTEM WORK:

BUSINESS ADDRESS_____PHYSICAL ADDRESS_____

CITY_____STATE_____COUNTY_____ZIP CODE_____

BUSINESS PHONE #:_____CITY/COUNTY BUSINESS LICENSE NUMBER:_____

WORK EXPERIENCE

BUSINESS EXPERIENCE

Employer	Job Title	Duties	Type of Business	Number of Years

DATE AND LOCATION OF TRAININGS/TESTINGS RECEIVED TO DATE: (complete all that apply)

Type of Training	Training Date	Sponsor and Location of Training
Basic Level Installer Training		
Pumper Training		
Portable Toilet Training		
Manufacture Training		
Advanced Level I Training		
Advanced Level II Training		

Applicants Statement: I hereby certify that there are no outstanding warrants issued against me in any county for work or services performed in the septic tank or onsite wastewater industry. I also hereby certify that all information provided is true and correct to the best of my knowledge and is given for the purpose of obtaining a license from the Alabama Onsite Wastewater Board under the provisions of the *Code of Alabama, 1975, ' 34-21A-1, et seq.* **I understand that this application is for a license which will expire December 31, 2017.** I have enclosed a check or money order made payable to the AOWB for the \$25.00 non-refundable application processing

Date_____Signature of Applicant_____