ALABAMA ONSITE WASTEWATER BOARD APPLICATION FOR 2024 LICENSE **THIS PAGE TO BE COMPLETED BY THE LICENSE APPLICANT**



Basic Level Installer	TYPE OF LICENSE APP	LYING FOR	:					
PERSONAL INFORMATION LAST NAME	Basic Level Installer		Manufacturer	Advanced Level I Installer		<u> </u>		
LAST NAME FIRST NAME MI MAILING ADDRESS PHYSICAL ADDRESS CITY STATE COUNTY ZIP CODE HOME PHONE #: SOCIAL SECURITY # DOB EMAIL ADDRESS: GENDER RACE BUSINESS INFORMATION NAME OF BUSINESS FOR WHICH YOU WILL PERFORM ONSITE WASTEWATER SYSTEM WORK: BUSINESS ADDR. PHYSICAL ADDR. CITY: STATE ALABAMA COUNTY: ZIP CODE BUSINESS PHONE# DUTIES WORK EXPERIENCE BUSINESS EXPERIENCE Employer Job Title Duties Type of Business # DATE AND LOCATION OF TRAININGS/TESTINGS RECEIVED TO DATE: (complete all that apply) Type of Training Training Sponsor and Location of Training Basic Level Installer Training Sponsor and Location of Training Manufacture Training Advanced Level II Training Advanced Level	Portable Toilet License		Pumper	Advanced	Advanced Level II Installer			
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