



ALABAMA ONSITE WASTEWATER BOARD

P.O. BOX 303552
MONTGOMERY, ALABAMA 36130-3552
PH: 334-353-9250
www.aowb.alabama.gov

AOWB LICENSURE EXAM DATES FOR 2026

02/13/2026	BASIC
06/12/2026	BASIC
10/09/2026	BASIC
01/16/2026	PUMPER
05/15/2026	PUMPER
09/18/2026	PUMPER
03/20/2026	ADV LEVEL I
07/17/2026	ADV LEVEL I
11/20/2026	ADV LEVEL I
04/17/2026	ADV LEVEL II
08/21/2026	ADV LEVEL II
12/11/2026	ADV LEVEL II



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ELIGIBILITY REQUIREMENTS TO OBTAIN A LICENSE FROM THE ALABAMA ONSITE WASTEWATER BOARD

The Alabama Onsite Wastewater Board made changes to its Administrative Code. Procedures were put in place for eligibility requirements for individuals applying for a license from the Alabama Onsite Wastewater Board.

The attached application should be completed in its entirety. If application meets eligibility requirements, you will receive notice to attend initial training and given a list of approved sponsors of the education.

To be eligible to attend initial training and take the exam for Pumper, Manufacturer or Portable Restroom License, you must show 6 months of work experience; a signed application by employer.

Please complete the application in its entirety as incomplete applications will be returned.

Email completed application to hannah.hollon@aowb.alabama.gov or mail to:

AOWB
PO Box 303552
Montgomery, AL 36130

ALABAMA ONSITE WASTEWATER BOARD APPLICATION FOR 2026 LICENSE

THIS PAGE TO BE COMPLETED BY THE LICENSE APPLICANT



TYPE OF LICENSE APPLYING FOR:

Basic Level Installer _____ Manufacturer _____ Advanced Level I Installer _____
 Portable Toilet License _____ Pumper _____ Advanced Level II Installer _____

PERSONAL INFORMATION

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# (_____) _____ CELL PHONE# (_____) _____

WORK EXPERIENCE

BUSINESS EXPERIENCE

Employer	Job Title	Duties	Type of Business	# 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, 2026.**

I have enclosed a check or money order made payable to the AOWB for the \$100.00 non-refundable application processing fee along with the license fee. One check for both fees is acceptable.

Date _____ Signature of Applicant _____