

**GUIDELINE on completing the Form –
Application for Operator Certification through Reciprocity**

GENERAL INFORMATION

This form should only be used for application through reciprocity; i.e. the individual holds an operator certificate (other than an operator-in-training) issued by another jurisdiction.

Form **MUST** be filled out completely and necessary documents attached, otherwise this **MAY CAUSE DELAY** in processing the application.

The information provided will be used to evaluate the application for an operator certificate through reciprocity under the Water and Wastewater Facility Operators Regulation (MR 77/2003).

If using a print out form **please check our website at www.manitoba.ca/certification to verify if the form being used is the latest revision.**

SECTION A: OPERATOR VERIFICATION

The application must be signed and dated by the operator.

SECTION B: OPERATOR INFORMATION

Information in this section is necessary to establish personal file and contact information. **Please indicate the name as you wish to have it appear on all documentation.** Address provided will be used for mailing Certification Program documents such as Operator Certificate and Certificate Renewal information; therefore, **provide a correct mailing address.**

If an operator wants the Certification Program documents to be mailed to the employer's address, they must provide a signed consent form and submit with the application. If there is a change of personal information (i.e. address, phone number, etc) after the application was made, immediately inform the Certification Program for your personal file to be updated.

Please provide your **daytime telephone number.** Provide an active email address. **Correspondence relating to your application will be sent by email.** Provide a fax number only if you do not have an email address.

SECTION C: EMPLOYER INFORMATION

Provide detailed information of your **current** employer.

**SECTION D: CERTIFICATE REQUEST
INFORMATION**

Indicate the category and class being applied for through reciprocity.

SECTION E: PREVIOUS CERTIFICATION

List down the category and class of certificate(s) issued by another jurisdiction. Indicate the date of issue and date of expiry of the certificate.

Provide the name of the Issuing Authority which issued the operator certificate, the contact person and their information.

The operator must submit a copy of the certificate issued by the other jurisdiction. Do not submit original.

SECTION F: APPLICATION FEE

Indicate the method of payment by checking the applicable box. If payment was made online, indicate the order ID number from the email receipt.

If paying with cheque, make cheque payable to Minister of Finance and submit it with completed application.

Make sure all required documents have been attached with the application before submitting to the Director. Failure to provide the necessary attachments may cause delay in processing your application. **Provide only copies of documents and not the originals.**

Forward the completed form to:

By Email: wwopcert@gov.mb.ca

OR

By Mail: **Certification Program Specialist**
Environmental Approvals Branch
Box 35 - 14 Fultz Boulevard
Winnipeg MB R3Y 0L6

Or Fax to 204-945-5229
Attention: Certification Program

**Please direct questions to:
Certification Program Specialist**

Email to wwopcert@gov.mb.ca

APPLICATION FOR OPERATOR CERTIFICATION THROUGH RECIPROCITY

Fill out this form completely and attach supporting documents as necessary. The information provided will be used to evaluate the application for operator certification through reciprocity under the Water and Wastewater Facility Operators Regulation (MR 77/2003).

Application Fee

As per Regulation 77/2003, the fee for an operator's certificate through reciprocity is \$75 for any category and class. Payable by cheque or money order payable to "Minister of Finance", or online by credit card. Fill in payment information on Page 3.

Attaching Documents

Payment, supporting documentation (certificate from other jurisdiction) must be submitted with this application form. If submitting via email, you may attach pdf copies of documentation. Incomplete applications will not be processed.

Provide copies only of supporting documentation. Keep your originals.

Print clearly or type and follow the instructions on the application form.

Notes:

If using a print out form, **check our website to verify if the form being used is the latest revision.**
If using Adobe Reader, text can be inserted directly into the form and tab between fields.

SECTION A: OPERATOR VERIFICATION

By signing this application, I hereby consent to the collection, use and dissemination of my personal information contained in this application by Manitoba Environment and Climate Change and its Certification Program administrators for the purpose of enforcement, renewals, data analysis, and certificate eligibility assessment. I further declare that all information in this application and the accompanying attachments are true.

Print Name:

Date Signed (YYYY-MM-DD)

Signature of Operator:

Forward the completed forms & fee to:

By Email: wwopcert@gov.mb.ca

or

By Mail: Certification Program Specialist

Environmental Approvals Branch
Environment and Climate Change
Box 35 - 14 Fultz Boulevard

or

Winnipeg MB R3Y 0L6

By Fax: 204-945-5229 Attention: Certification Program

Please direct questions to:

Certification Program Specialist

Email: wwopcert@gov.mb.ca

Personal information is collected under the authority of The Environment Act, the Water and Wastewater Facility Operators Regulation amendment and will be used to issue certificates and for administration and enforcement purposes. Information collected is protected by the privacy provisions of The Freedom of Information and Protection of Privacy Act. If you have any questions, contact the Certification Program at wwopcert@gov.mb.ca

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SECTION B: OPERATOR INFORMATION		
Last Name:	Given Name(s):	
Job Title:	Date of Birth: (YYYY-MM-DD)	
Mailing Address		
City/Town/Village:	Province:	Postal Code:
Daytime Telephone No.:	Email:	
Fax No.: (required only if no email address is provided)		

SECTION C: EMPLOYER INFORMATION (IF CURRENTLY EMPLOYED IN MANITOBA)		
Name of Employer / Operating Authority: (Municipality, City, Company, Colony, etc.)		
Address:		
City/Town/Village:	Province:	Postal Code:
Telephone No.:	Fax No.:	Email:

SECTION D: CERTIFICATE REQUEST INFORMATION				
Check the box for the certificate(s) for which you are applying.				
Small System (Sm)	<input type="checkbox"/> Water Works	<input type="checkbox"/> Wastewater Works		
Water Treatment (WT)				
<input type="checkbox"/> Class I	<input type="checkbox"/> Class II	<input type="checkbox"/> Class III	<input type="checkbox"/> Class IV	
Water Distribution (WD)				
<input type="checkbox"/> Class I	<input type="checkbox"/> Class II	<input type="checkbox"/> Class III	<input type="checkbox"/> Class IV	
Wastewater Treatment (WWT)				
<input type="checkbox"/> Class I	<input type="checkbox"/> Class II	<input type="checkbox"/> Class III	<input type="checkbox"/> Class IV	
Wastewater Collection (WWC)				
<input type="checkbox"/> Class I	<input type="checkbox"/> Class II	<input type="checkbox"/> Class III	<input type="checkbox"/> Class IV	

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SECTION E: PREVIOUS CERTIFICATION		
Category and Class of Certificate: (e.g., Water Treatment Class I)	Date of Issue: (YYYY-MM-DD)	Date of Expiry: (YYYY-MM-DD)
Issuing Authority (i.e. Ontario Ministry of Environment; Alberta Environment etc.):		
Contact Person at Issuing Authority:		
Telephone No.:	Email:	
Note: The operator must submit together with this application a copy of their certificate issued by the above stated Issuing Authority.		

SECTION F: APPLICATION FEE
Application Fee is \$75 for Operator Certification through Reciprocity
Indicate method of payment:
<input type="checkbox"/> Cheque (Include cheque, <u>payable to Minister of Finance</u> with completed application and send by mail.)
<input type="checkbox"/> Online payment
https://forms.gov.mb.ca/water-and-wastewater-operator-certification-online-payment/ _____
Provide order ID number (from email receipt):
<input style="width: 150px; height: 20px;" type="text"/>

Note: Make sure to provide all the necessary attachments to prevent delay of processing your application. You do not need to mail the original if you are emailing the application.