



**APPLICATION FOR A-1A (SPECIAL) AND
A-1H (NONCONTACT COOLING WATER) CERTIFICATION**

By authority of 1994 PA 451, as amended.

Payment and submission information
are listed on the last page of this application.

For Cashier's Use Only Hot Key WWF

Accounting Template 761WRDOPERCERTR

Applicant Name (Last, First, Middle Initial):		E-mail:	
Home Mailing Address:	Phone Number:	W Number (If applicable) W-	

FACILITY INFORMATION

Only complete this section if you are employed by the permittee or facility owner.

Facility Name:	Employment Verification: I find the statements and information contained in this application to be true and correct to the best of my knowledge:
Mailing Address:	
Dates of employment at this facility (MM/YY): From: To:	
Hours per week in this facility:	Permittee or Facility Owner Name (Print/Type) _____
	Permittee or Facility Owner (Signature) _____
	Permittee Phone Number:
	Permittee Email:

Only complete this section if your employer is not the permittee or facility owner and add only the facility name and address in the above box.

Employer (ex. consulting firm):	Employment Verification: I find the statements and information contained in this application to be true and correct to the best of my knowledge:
Mailing Address:	
Dates of employment (MM/YY): From: To:	
Hours per week in this facility:	Employer Supervisor Name (Print/Type) _____
	Employer Supervisor (Signature) _____
	Supervisor Phone Number:
	Supervisor Email:

I hereby certify that all information contained on all pages, including attachments, is accurate and complete. I fully understand that falsification of this application may result in denial or revocation of certification.

Applicant Signature _____ Date _____

Applying for (A-1a or A-1h – Separate applications must be submitted if applying for both.)

1. Describe the process(s) generating the water discharged by this facility relating to the A-1a or A-1h classification.
2. List all wastewater classifications assigned by the Michigan Department of Environment, Great Lakes, Energy (EGLE) for this facility and the EGLE District Office to which it reports.
3. Describe your duties and responsibilities pertaining to the discharge of this water.
4. How long have you held these duties?
5. Indicate the point of discharge (name of lake, river, stream, etc.).
6. Describe any measuring and monitoring devices used in controlling this discharge. Include calibration procedures and indicate how frequently this equipment is calibrated.
7. Indicate the average flow quantity discharged per day.
8. To your knowledge, are there or have there ever been any adverse effects on the receiving waters because of this discharge? If so, explain.
9. List any chemicals added to the water being discharged, giving approximate concentration and reason for use.

GENERAL APPLICATION INFORMATION AND INSTRUCTIONS

If you have any questions pertaining to your Facility Classification, [contact the EGLE District Office for your area.](#)

MINIMUM EXPERIENCE REQUIREMENTS

A-1a This is a special classification intended for facilities that discharge small flows, has minimal environmental impact, and where no other classifications apply (facilities classified as A-1a may not have other classifications). Applicants must have experience with a discharge classified by EGLE as A-1a.

A-1h This classification applies to the discharge of cooling water that has not become contaminated through contact with process equipment or flows and is discharged directly into groundwater or surface receiving water without passing through a wastewater treatment process. A minimum of 6 months operational experience in this classification is required before obtaining certification. This experience must be gained before the application is submitted.

MINIMUM EDUCATION REQUIREMENTS

- The ability to read and write.
- Comprehension of the principles and problems of management of the treatment process and facilities.
- The ability to perform arithmetic calculations necessary to operate the waste treatment or control facility and prepare required reports.

PAYMENT AND SUBMISSION INSTRUCTIONS – THE EXAM FEE IS \$30

CREDIT CARD

Visit: <https://www.thepayplace.com/mi/deq/indwastewtr> and pay the fee. Then, send your completed application to EGLE-WRD-OpCert@Michigan.gov. In your email, please indicate that you paid online.

CHECK

Please make check payable to “State of Michigan”. Mail completed application and fee to:

Department of Environment, Great Lakes, and Energy Cashier’s Office – WRD
MDOT Accounting Services Division
PO Box 30657
Lansing, Michigan 48909-8157

For information or assistance on this form, please contact the Water Resources Division through the EGLE Environmental Assistance Center at 800-662-9278. This form is available in alternative formats upon request.

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This form and its contents are subject to the Freedom of Information Act and may be released to the public.