

Illinois EPA – Operator Certification BOW/CAS#19 1021 North Grand Avenue East, PO Box 19276 Springfield, Illinois 62794-9276 Telephone 217-785-0561

Signature:_____



Daytime Phone: _____

		OPERATOR TRAINING F	<u>ORM</u>	
Operator Name (please print)		Water Operator 9-digit ID Number (not Social Security Number)		
*Course ID Number	ber Name of Company or Organization Providing Training		Course Training Name	
15965	Jamie Mays, Maguire Iron/ IRWA		DCT Renovating Steel Welded Water Tanks	
Date(s) of Training	Hours/Minutes	City (Where Training Occurred)		
09/08/2021	1.0	Live Webinar		
			on on identifying welded steel tanks that need renovation and how to	
determine the proper method(s)	and process to complete tar	ik restoration.		
*Effective 7/1/2012, you must in	ıclude Course ID Number o	n this form or it will be returned. Until 7/1/2	012, if not known, leave blank.	
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•		• •	e listed training. I understand that proof of training records must be form used in the certificate renewal process may result in denial of	
• •	•	•	who knowingly makes a false, fictitious, or fraudulent material	
			fense after conviction is a Class 3 felony. (415 ILCS 5/44(h))	

Date:_____