

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 Name (please print)		Water Operator 9-digit ID Number (not Social Security Number)	
*Course ID Number 17896	Name of Company or Organization Providing Training IRWA/Maguire Iron - Tony Grant		Course Training Name DWT Water Tank Inspections
Date(s) of Training 01/11/2023	Hours/Minutes 1.0	City (Where Training Occurred) Live Webinar	
•		his webinar, participants will learn about the various etermine what type of inspection is right for your ta	• • • • • • • • • • • • • • • • • • • •
*Effective 7/1/2012, you must inc	lude Course ID Number on th	nis form or it will be returned. Until 7/1/2012, if no	ot known, leave blank.
maintained by me for a period of certificate renewal or restoration	four years. I further acknowledge and is a cause of certificate re	ledge that falsification of this form or any form use evocation and/or suspension. Any person who know	aining. I understand that proof of training records must be d in the certificate renewal process may result in denial of wingly makes a false, fictitious, or fraudulent material er conviction is a Class 3 felony. (415 ILCS 5/44(h))

Date:_____

OPERATOR TRAINING FORM