



**Illinois  
Environmental Protection Agency**



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

**OPERATOR TRAINING FORM**

Operator Name *(please print)*

Water Operator 9-digit ID Number (not Social Security Number)

*Course ID Number  18795	Name of Company or Organization Providing Training  USEPA Technical Assistance Webinar Series/Larry W. Moore, PH.D., P.E., WEF Fellow		Course Training Name  WWT/Preliminary Wastewater Treatment
Date(s) of Training  07/25/2023	Hours/Minutes  90 Minutes	City (Where Training Occurred)  <a href="https://www.zoomgov.com/webinar/register/WN_07GZEFS2SIS01YH34gzkHw">https://www.zoomgov.com/webinar/register/WN_07GZEFS2SIS01YH34gzkHw</a>	
This presentation will focus on preliminary treatment of municipal wastewater. The topics to be covered include screening, comminutors, grit removal, and flow equalization. Description of the unit operations will be provided along with potential operating problems. Pictures of actual treatment units will be shown. In addition, troubleshooting will be covered at the end of the presentation.			

*\*Effective 7/1/2012, you must include Course ID Number on this form or it will be returned. Until 7/1/2012, if not known, leave blank.*

I certify that the above information is true and accurate and that I have successfully completed the above listed training. I understand that proof of training records must be maintained by me for a period of four years. I further acknowledge that falsification of this form or any form used in the certificate renewal process may result in denial of certificate renewal or restoration and is a cause of certificate revocation and/or suspension. Any person who knowingly makes a false, fictitious, or fraudulent material statement, orally or in writing, to the Illinois EPA commits a Class 4 felony. A second or subsequent offense after conviction is a Class 3 felony. (415 ILCS 5/44(h))

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_