



STATE OF FLORIDA

# DEPARTMENT OF ENVIRONMENTAL PROTECTION

## APPLICATION FOR SEPTIC TANK CONTRACTOR

### REGISTRATION RENEWAL

FORWARD COMPLETED APPLICATION, PASSPORT  
STYLE PHOTO (REQUIRED EVERY 5 YEARS STARTING  
WITH THE 2004 RENEWAL CYCLE), AND \$100.00 FEE TO:

DEPARTMENT OF ENVIRONMENTAL PROTECTION,  
OPERATOR CERTIFICATION PROGRAM  
2600 BLAIR STONE ROAD, MS 3506,  
TALLAHASSEE, FL 32399-2400

MAKE CORRECTIONS IN THE SPACES BELOW. NOTIFY  
THE OPERATOR CERTIFICATION PROGRAM OFFICE  
WITHIN 30 DAYS OF ANY CHANGES.

APPLICATION FOR ☐ REGISTERED ☐ MASTER SEPTIC TANK CONTRACTOR RENEWAL

NAME

MAILING  
ADDRESS

BUSINESS  
NAME

COUNTY

TELEPHONE

FAX

CONTINUING EDUCATION: ATTACH A COPY OF CERTIFICATE OF ATTENDANCE. LIST MASTER CONTRACTOR  
LEVEL COURSES FIRST AND CHECK "ML" FOR MASTER LEVEL COURSES.

COURSE TITLE	LOCATION	DATE	ML

I AFFIRM THE INFORMATION CONTAINED IN THIS APPLICATION, WHICH SERVES AS THE BASIS FOR DETERMINING  
MY ELIGIBILITY FOR REGISTRATION RENEWAL, IS TRUE. I UNDERSTAND ANY MISREPRESENTATION OR  
CONCEALMENT OF MATERIAL FACTS IN THIS APPLICATION IS GROUNDS FOR AN ADMINISTRATIVE FINE OR  
DENIAL OR REVOCATION OF MY SEPTIC TANK CONTRACTOR REGISTRATION.

APPLICANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

<b>FOR OFFICE USE ONLY</b>	Application Check No. _____	Registration Number: _____
	Date of Application Check: _____	_____
	Check Amount: _____	Date Issued: _____
	Date of Approval: _____	_____
	or Date of Denial: _____	