

On-Site Wastewater Treatment Systems Inspector Certificate of Competency Experience Verification



One year of practical work experience showing how you have become proficient in, and have successfully worked with, the on-site wastewater industry.

23201-Supporting

Your one year of practical work experience must be under the supervision of a certificate of competency holder or one year of previous work under a licensed on-site designer or professional engineer.

The approval of the experience is based on the verification provided by you, the level of independent judgments and decisions, and demonstration of the ability to work within the regulatory structure.

Missing information and/or poor explanations will delay the review of your application.

- Do not assume that there is a universal understanding by reviewers as to how your experience satisfies requirements.
- Do not use business or industry related jargon or acronyms.

For questions or help call: 360-664-1575 or email: engineers@brpels.wa.gov

Applicant: must complete sections 1 and 2 Verifier: must complete section 3

Applicant instructions

- · Complete sections 1 and 2.
- Send a copy of the completed form to your verifiers.
- Your verifiers should complete section 3 and send it back to you in a sealed envelope. Do not open or review their comments.
- Verifiers may also choose to email the completed verification directly to engineers@brpels.wa.gov.
- When you have all your forms back from your verifiers, mail the completed sections 1 and 2 along with the sealed envelopes to:

Board of Registration for Professional Engineers and Land Surveyors PO Box 9025
Olympia WA 98507-9025

Section 1 - Work experience information—Applicant completes this section

TYPE or PRINT Applicant name (First, Middle	initial, Last)	
Employed by		
Dates of employment (From, To)	Average hours worked per week	
Supervisor name and title		

provide additional details of each project. Include extra pages as needed.
Do not use general statements in your responses.
 When describing your experience, be specific about how you have become proficient in, and
successfully worked with, the wastewater treatment system industry. State exact duties performed.
One sentence descriptions are not acceptable.
 Explain your experience in chronological order; demonstrate your experience progression over time.
A. Review of soils and water tables
B. Review of septic system designs.
C. Review of system troubleshooting and operations and maintenance.

Section 2 - Work experience descriptions—Applicant completes this section.

Describe your duties, responsibilities and work performed in each of the listed topics along with specific examples of the on-site septic systems projects you have worked on. If your responses to A-G come from multiple projects,

Applicant name

Applicant name	
Work experience descriptions - Continued	
D. Review of system installation and construction.	
E. Review of platting and subdivisions.	
F. Review of well sitting, testing and construction.	
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G. Understanding of WAC 246-272A and associated WA State Dept. of Health RS&G's.	

Applicant name	
Verifier Instructions	
Refer to applicant's information in sections 1	and 2 to answer the questions
below. When you are done:	·
 Put the form in an envelope. 	
 Seal the envelope and sign across the 	e flap
 Return the sealed envelope to the app 	plicant
 Or you can scan and email it directly ((not to the applicant) to engineers@brpels.wa.gov .
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TYPE or PRINT Name of person completing this verification	ation - Supervisor/Verifier complete this section.
TIPE OF PRINT Name of person completing this vernication	Title
(Area code) Phone number	Email address
Registration/License Number	Expiration Date
Describe your level of supervision over the appl	licant's work.
If you are not the applicant's supervisor, please	e explain your working relationship to the applicant and how you are able t
provide this verification.	y explain year from any relationering to the applicant and from year are able to
admission to the profession:	n you believe the applicant is competent and prepared to be examined for
■ A. Review of soils and water tables	
■ B. Review of septic system designs	
☐ C. Review of system troubleshooting and o	operations and maintenance
■ D. Review of system installation and constr	ruction

■ E. Review of platting and subdivisions

☐ F. Review of well sitting, testing and construction

☐ G. Understanding of WAC 246-272A and associated WA State Dept. of Health RS&G's.

oplicant name		
How does the applicant's de	scription of experience, including the scope and complexity of the work, match your eval	luatio
	typical project for which the applicant made independent judgments and decisions a	and
emonstrated the ability to	work within the regulatory structure.	
	rjury under the law of Washington that the statements and answers contained in this ect to the best of my knowledge and the statements given regarding myself are true a	
	TYPE or PRINT Name	
	TIPE OF PRINT Name	
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e and place	Signature	
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	or seal in the space below. If no seal or stamp is available, attach a copy of your cense cannot be provided, provide a detailed explanation.	urre