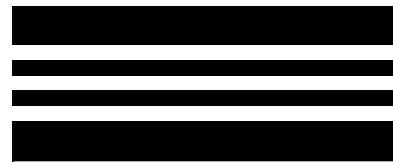




# On-Site Wastewater Treatment System Inspector Certificate of Competency Application



Apply for an On-Site Wastewater Treatment System Inspector Certificate of Competency.

Online: <https://professions.dol.wa.gov>

Or mail this completed form with a check or money order for \$175 (payable to the Department of Licensing) to:



**Board of Registration for Professional Engineers and Land Surveyors On-Site Program**  
**PO Box 3777**  
**Seattle, WA 98124-3777**

Licenses are available for self-printing with an online account.  
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We'll review your application and email your information about the next steps.

For questions or help email [engineers@brpels.wa.gov](mailto:engineers@brpels.wa.gov) or call (360) 664-1575

## Applicant information

TYPE or PRINT Name as you would like it to appear on your license				
Full legal name (First, Middle, Last)				
Social Security number*		Date of birth (mm/dd/yyyy)		Email
Mailing address				
City		State	ZIP code	County
Military? (check if applicable) Current or former: <input type="checkbox"/> Military member <input type="checkbox"/> Military spouse or domestic partner				
Present position			Exam location preference <input type="checkbox"/> Eastern WA <input type="checkbox"/> Western WA	

\*You are not required to have a Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN or TIN) to apply for or be issued a license. If you do not have an SSN or ITIN, leave that section blank. If you do have a SSN, ITIN or TIN, you are required by federal and state law to provide it on the application (42 U.S.C. 666(a)(13) and RCW 74.20A.320).

*I declare under penalty of perjury under the law of Washington that the foregoing is true and correct.*

\_\_\_\_\_  
 TYPE or PRINT Name

\_\_\_\_\_  
**X**  
 Applicant signature

\_\_\_\_\_  
 Date and place

**Providing any false information in this application may be cause for denial, suspension, or revocation of your professional license in the State of Washington.**