# State of Nevada / Nevada Water Environment Association
## *Wastewater Application for Replacement/Duplicate Certificate*

Name _____ Certificate Number _____

Grade _____ Expiration Date _____

Address _____

**INSTRUCTIONS:**
Please complete this form and return with a **$20** non-refundable check or money order made payable to **NDEP** *(Nevada Division of Environmental Protection).*

***Please provide the following information to help us stay in contact with you:***

Email: _____ Phone: _____ Fax: _____

Mailing Address (if changed from above): _____

_____

Present Employer _____

Employer Address _____

Present Job Title _____ Date of Hire _____

☐ YES, you may release my personal information.

☐ NO, please do not release my personal information.

**Signature** _____ **Date** _____

***Mail this form and your $20 payment to:***

**NDEP**
**901 S. Stewart St., Suite 4001**
**Carson City, NV 89701**

FOR OFFICE USE ONLY:
Check # _____
Date Received _____
Database Updated _____
Renewal Mailed _____

**To contact us:**
***Hotline:*** **775-465-2045**
***E-mail:*** **certification@nvwea.org**
***Web Site:*** **www.nvwea.org**