



STATE OF DELAWARE  
DEPARTMENT OF NATURAL RESOURCES  
& ENVIRONMENTAL CONTROL  
**DIVISION OF WATER RESOURCES**  
89 KINGS HIGHWAY  
DOVER, DELAWARE 19901

Board of Certification

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**POLICY FOR APPROVAL OF CERTIFIED OPERATOR TO OPERATE  
MORE THAN ONE WASTEWATER TREATMENT FACILITY**

A. Basic Concept:

Operation of a wastewater treatment facility is intimately connected to the protection of the environment and therefore such operation requires training, experience, and a degree of commitment and care by the operator.

Performing the functions of an operator is not a custodial function but is a professional activity that requires planning, scheduling and active intervention by the operator.

B. Operator Eligibility:

To be approved to operate more than one treatment plant, a regular or backup operator must meet the following requirements:

1. The operator shall have a minimum of a Class II license and shall be properly licensed for the highest class of treatment facility being operated.
2. The existing treatment facility(s) being operated by the operator shall show no violations of the same effluent parameter for more than two (2) consecutive months that are not beyond the operator's control before the Board of Certification will consider the operator's written request to operate more than one (1) or additional treatment facility(s).
3. If the operator is permanently employed full-time by others, then the operator shall provide a letter from the permanent employer stating the operator can maintain the treatment facility(s) and be immediately available during normal working hours of the permanent employer to answer and immediately respond to emergency calls at the facility(s) being operated. The letter shall also state that the permanent employer will notify the Department of Natural Resources and Environmental Control (DNREC) in writing within five (5) calendar days if this internal policy changes.

C. Limitations:

1. A certified operator may serve as a regular and/or backup operator in direct responsible charge (DRC) of a combination of facilities in accordance with the following table. An operator may be approved to operate in DRC any combination of facilities provided that the total accumulation of regular points from the table below does not exceed 25 regular points. An operator may serve as a backup operator at wastewater facilities other than the ones currently operated provided the total accumulation of backup points from the table below does not exceed 20 backup points.

**WASTEWATER**

<b><u>Type</u></b>	<b><u>Points, Regular Operator</u></b>	<b><u>Points, Backup Operator</u></b>
A	15	8
B	10	5
C	5	3
D	3	2
E	2	1

Where the type of wastewater facility is determined by permitted plant design average flow as shown in the following table:

**TYPES OF WASTEWATER TREATMENT FACILITIES  
BY PERMITTED PLANT DESIGN AVERAGE FLOW**

<b><u>Types</u></b>	<b><u>Design Average Flow</u></b>
A	Greater than 500,000 Gals/Day
B	200,001 - 500,000 Gals/Day
C	50,000 - 200,000 Gals/Day
D	<50,000 Gals/Day
E ***	<50,000 Gals/Day

\*\*\**Limited to basic, conventional type on-site systems utilizing a septic tank as the primary treatment process. Does not include any "enhanced" conventional septic tank systems.*

2. The operator's authority to operate more than one (1) facility may be immediately revoked by DNREC if:
  - a) It is found that the operator has practiced fraud or deception; or
  - b) That reasonable care, judgment, or the application of knowledge or ability was not used in the performance of the operator's duties; or
  - c) That the operator is incompetent or unable to perform duties properly; or

- d) If discharge monitoring reports for any one (1) specific treatment facility being operated show violations of the same effluent parameter for more than two (2) consecutive months that are not beyond the operator's control.

The operator may recommend for DNREC's consideration which one (1) of the facilities the operator would prefer to continue to operate.

- 3. Prior to consideration of multi-plant operations, the owner(s) of the facility shall have submitted to DNREC a plan for the operation of the facilities, including provision for: employment of needed staff; receipt of information; transmission to staff of operational direction; and review, approval and submittal of plans.
- 4. The operator shall submit the normal schedule for operating and maintaining all treatment facilities. A minimum of two (2) treatment facility operation and maintenance visits per calendar week is required for the simplest of facilities, [except as noted in the table below]. More frequent visits may be required depending upon the operational complexity of each facility. In submitting the schedule, the operator shall note thereon that DNREC shall be notified in writing with an amended schedule within five (5) calendar days of any change to the original or previously approved schedule. Failure to do so may result in revocation of the operator's privilege to operate more than one (1) facility.

The operator in responsible charge should visit each facility for which he is responsible at least as frequency as shown on the following table:

**ALL SEWAGE TYPES**

<b><u>Type</u></b>	<b><u>Minimum Frequency</u></b>
A	Daily
B	Daily
C	Three times per week
D	Two times per week
E ***	One time every two weeks

*\*\*\*Limited to basic, conventional type on-site systems utilizing a septic tank as the primary treatment process. Does not include any "enhanced" conventional septic tank systems.*

- 5. The regular operator or, in his absence the backup operator, shall be on 24-hour call and shall be able to respond to any treatment facility being operated and arrive at the facility within 60 minutes after receiving notification, whether during emergencies or normally scheduled operations and shall have a communication system which will provide for contact with the operator during both working and off-duty hours. This communication system may be as fundamental as a list of telephone numbers where the operators can most likely be reached during routine daily activities.

6. A schedule of routine visits to each facility, for which an operator is responsible, must be submitted with the request for approval to operate more than one facility. The schedule should be updated if significant changes occur. Copies of the schedule shall be provided to the designated backup operator for each facility and shall be posted at each facility for which the operator is responsible.
7. The regular operator shall assure that the backup operator is available to assume responsibility for the operation of each facility when the regular operator is not available. The backup operator shall meet the requirements of a regular operator during such period of service.

D. Requirements/Exceptions For Responsible Management Entities (RME):

A Responsible Management Entity or RME is a legal entity that contracts to maintain responsibility for managing and operating multiple wastewater treatment systems, and shall be guided by all of the requirements of this policy, with the following additional requirements and/or exceptions:

1. A Responsible Management Entity (RME) is defined as any legal entity (ie: company, corporation, partnership, etc.), consisting of six or more employees, that is responsible for providing various management and operating services with the requisite managerial, financial, and technical capacity to ensure the long-term management of multiple wastewater treatment facilities in accordance with all applicable regulations and performance requirements.
2. Any facility being managed and operated by an RME will continue to be required to send in a "4.04 Letter" whenever there is a change in the DRC Operator as defined in "Regulations For Licensing Operators Of Wastewater Facilities". Changes in other operators would not require an updated 4.04 Letter. The RME managing the facility, however, will be required to send in a Quarterly Report to the Department. This Quarterly Report must list all Wastewater Operators employed by the RME, their assigned locations, dates assigned, points allocation, etc. The report will show DRC Operators, back-up operators, facility assignments, location of facilities, visit frequencies, etc. Any change in the facility listing must be communicated to the Department within 30 days (this includes any additions or deletions of facilities). This Quarterly Report will be used to track Licensed Operator's facility locations, facility classification, and operator experience.
3. The RME must maintain and track "Point Allocations" as specified in Section C.1 of the current "Policy For Approval Of Certified Operator To Operate More Than One Wastewater Treatment Facility". It will be the responsibility of the RME to ensure that the scope of work and responsibilities for all licensed operators is guided by the "Point Allocations" and that the maximum allowable multi-plant points are not exceeded. If it is found that an operator or operators have or are operating beyond their maximum allowable points for multi-plant operations, this

could be grounds for revocation of the operators authority to operate in more than one (1) facility. Additionally, if the RME is found to have practiced fraud or deception in tracking and/or allocating points for their operators, authority to operate multiple facilities for all operators working for the RME could be subject to revocation.

4. Full time employees of an RME who will be assigned to multi-plant operations must complete the Application For Full Time Employees Of A Responsible Management Entity for Approval To Operate More Than One Facility. This application must be filed on the initial assignment of any full time employee; thereafter, any changes to assignments will be included in the RME's required Quarterly Report to the Department.
5. If the RME employs any Part-Time Operators who desire to operate more than one wastewater facility, the Part-Time Operator must follow all sections of this policy as would apply to any single operator, and must submit the traditional application to gain approval to operate more than one wastewater facility. The RME must note all Part-Time Operating Personnel on the required Quarterly Report to the Department.

### **APPLICATION PROCESS**

To apply for approval of a certified operator to operate more than one wastewater treatment plant, the applicant must submit two copies of the application to the Board of Certification.

The following documents must be attached to each copy of the application:

1. A map, folded to the size of the application form, showing a scale and the name and location of:
  - a) All plants named on the application.
  - b) Office and homes of regular and backup operators.
  - c) Roads and distances between plants, offices and homes of the regular and backup operators.
2. A letter from the permittee of each facility listed on the application form which gives concurrence with the request of the applicant.

### **Instructions for Completing Application Form**

NOTE: Please type or print legibly all information being placed on the form. Upon approval, the application will be officially signed and returned to the applicant and copies must be posted at each facility listed.

1. Operator's Name:

2. Home Address and Telephone Numbers:
3. Business Address and Telephone Numbers: Enter address and telephone number where applicant can most likely be contacted during business hours.
4. Operator's Certification Number & Class: Enter certificate number of valid certificate which has been issued to the applicant by the State Board of Certification. Enter Class (IV, III, II, I) of each certificate held by the applicant.
5. Class: Enter the appropriate number (I, II, III, IV) for each facility listed.
6. Type: Enter the appropriate letter (A, B, C, D, E) for each facility listed.
7. Name of Facility:
8. Municipality: Enter name of municipality or area in which the facility is located.
9. County: Enter name of county in which the facility is located.
10. Position (Check One): Place an X in the appropriate column (First Certified Operator or Backup Certified Operator) to denote the position for which the applicant is applying for approval at each facility. A first certified operator is an operator in direct responsible charge and a backup certified operator is an operator who would be in direct responsible charge when the first certified operator is not available.
11. Name of Employer: Indicate the names of employees for any full or part-time position(s) applicant holds in addition to those listed in Item 12.
12. Position Applicant Holds or Work Description:
13. Hours of Work: Indicate hours per week for each position in Item 14.
14. Work Plan: Answer in detail the question stated.
15. Signature:

Authorization for the applicant to be responsible for the operation of the facilities listed will be granted, upon approval of the Department, by returning the form to the applicant with the signature of the Board members or authorized person.

Upon receiving official approval, the applicant must post a copy of the form, along with a copy of his certificate, at each facility listed on the form.

**DEPARTMENT OF NATURAL RESOURCES  
AND ENVIRONMENTAL CONTROL**

**APPROVAL FOR CERTIFIED OPERATOR TO OPERATE MORE THAN ONE WASTEWATER TREATMENT FACILITY**

**1: OPERATOR'S NAME:** \_\_\_\_\_

**2: HOME ADDRESS AND TELEPHONE NUMBER:** \_\_\_\_\_

**3: BUSINESS ADDRESS AND TELEPHONE NUMBER:** \_\_\_\_\_

**4: OPERATOR'S CERTIFICATE NUMBER & CLASS:** \_\_\_\_\_

**FACILITY INFORMATION**

<b>5: CLASS</b>	<b>6: TYPE</b>	<b>7: FACILITY</b>	<b>8: CITY</b>	<b>9: COUNTY</b>	<b>10: First Certified Operator</b>	<b>Back-Up Operator</b>
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**THIS APPROVAL IS GRANTED UNDER THE REGULATIONS FOR LICENSING OPERATORS OF WASTEWATER FACILITIES:**

**BY:** \_\_\_\_\_  
**Board of Certification**

**DATE:** \_\_\_\_\_

**OTHER JOBS APPLICANT HOLDS**

**11: NAME OF EMPLOYER** \_\_\_\_\_

**12: POSITION APPLICANT HOLDS OR WORK DESCRIPTION:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**13: HOURS OF WORK:** \_\_\_\_\_

**14: WORK PLAN – DESCRIBE NORMAL WORK SCHEDULES, EMERGENCY STAFFING PLANS, AND ESTIMATED TRAVEL TIMES BETWEEN FACILITIES AND BETWEEN YOUR HOME AND EACH FACILITY (USE ADDITIONAL SHEET IF NECESSARY).**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**15: I, \_\_\_\_\_, BEING DULY SWORN ACCORDING TO LAW, DEPOSE AND SAY THAT I AM THE APPLICANT AND THAT THE STATEMENTS IN THIS APPLICATION ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.**

**SIGNATURE OF APPLICANT:** \_\_\_\_\_

**DATE:** \_\_\_\_\_



DELAWARE  
DEPARTMENT OF NATURAL RESOURCES  
AND ENVIRONMENTAL CONTROL

FULL TIME EMPLOYEES OF A RESPONSIBLE MANAGEMENT ENTITY (RME)

APPROVAL FOR CERTIFIED WASTEWATER OPERATOR TO OPERATE MORE THAN ONE FACILITY.

Operator's Name: \_\_\_\_\_.

Home Address: \_\_\_\_\_  
\_\_\_\_\_.

Name and business address of the RME: \_\_\_\_\_  
\_\_\_\_\_.

Operator's Certificate Number and Classification: \_\_\_\_\_.

Initial Multi-Plant Assignments: Use Appendix A to list all facility assignments

Describe initial plan of work schedule: Use Appendix A to describe initial work plan schedule

I, \_\_\_\_\_, being duly sworn according to the law, depose and say that I am the applicant and that the statements in this application are true and correct to the best of my knowledge and belief.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_.

I, \_\_\_\_\_, being duly sworn according to the law, depose and say that I am an authorized representative of the above mentioned RME, and that the statements in this application are true and correct to the best of my knowledge and belief.

Signature of RME Representative: \_\_\_\_\_ Date: \_\_\_\_\_.

***THIS APPROVAL IS GRANTED UNDER THE REGULATIONS FOR LICENSING OPERATORS OF WASTEWATER FACILITIES:***

By: \_\_\_\_\_ Date: \_\_\_\_\_.  
(Board of Certification)

