

**ALABAMA ONSITE WASTEWATER BOARD
APPLICATION FOR ADVANCED LEVEL II INSTALLER**

THIS PAGE TO BE COMPLETED BY THE LICENSE APPLICANT

PERSONAL INFORMATION

LAST NAME _____ FIRST NAME _____ MI _____

HOME ADDRESS _____ PHYSICAL ADDRESS _____

CITY _____ STATE _____ COUNTY _____ ZIP CODE _____

HOME PHONE #: _____ CELL PHONE#: _____

SOCIAL SECURITY # _____ DOB: _____

BUSINESS INFORMATION

NAME OF BUSINESS FOR WHICH YOU WILL PERFORM ONSITE WASTEWATER SYSTEM WORK:

BUSINESS ADDRESS _____ PHYSICAL ADDRESS _____

CITY _____ STATE _____ COUNTY _____ ZIP CODE _____

BUSINESS PHONE #: _____ CITY/COUNTY BUSINESS LICENSE NUMBER: _____

WORK EXPERIENCE

BUSINESS EXPERIENCE

Employer	Job Title	Duties	Type of Business	Number of years

DATE AND LOCATION OF TRAININGS/TESTINGS RECEIVED TO DATE: (complete all that apply)

Type of Training	Training Date	Location
Basic Level Installer Training		
Advanced Installer Training		

Applicants Statement: I hereby certify that there are no outstanding warrants issued against me in any county for work or services performed in the septic tank or onsite wastewater industry. I also hereby certify that all information provided is true and correct to the best of my knowledge and is given for the purpose of obtaining a license from the Alabama Onsite Wastewater Board under the provisions of the *Code of Alabama, 1975, 34-21A-1, et seq.*

Date _____ Signature of Applicant _____

Date _____ Signature of Witness _____