## **NCOWCICB**

## NORTH CAROLINA ONSITE WASTEWATER CONTRACTOR INSPECTOR CERTIFICATION BOARD APPLICATION FOR CERTIFICATION EXAM

INSTRUCTIONS: 1. COMPLETE THE BELOW FORM IN ITS ENTIRETY (note: For new applicants this application must be received by NCOWCICB no later than 15 BUSINESS DAYS prior to the exam date, for current certification holders upgrading to higher level application must be received at least 24 hours prior to exam date)

- 2. YOU WILL RECEIVE CONFIRMATION OF APPROVAL TO RECEIVE EXAM ALONG WITH LOCATION AND TIME OF EXAM 7 DAYS PRIOR TO EXAM. CONFIRMATIONS ARE SENT VIA EMAIL
- 3. INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

NAME			DATE OF BIRTH	
FIRST	MIDDLE	LAST	MM/DD/YR	
COMPANY NAME: _				
COMPANY ADDRES	S:			
	STREET	CITY	ST	ZIP
COMPANY PHONE:	()	FAX: _()		
EMAIL ADDRESS: _				
☐ GRADE LEVELEXAM LOCATION (C ☐ March 5, 2024 ☐ June 3, 2024 ☐ August 24, 20 ☐ Nov 2024 Cal	HECK ONLY ONE):* 4 Clemmons, NC Carolina Beach, NC 124 Asheville, NC 1ry, NC date TBD	NT YOU WILL BE TAKING):  □INSPECTOR □EVALUATO  NGE. CONFIRMATION WILL C		ACT LOCATION
HOURS RECEIVED [	🗌 12 HOURS 🔃 9 HOUR	OR CLASS   Evaluator Class		on.
PLEASE CHECK H	IERE IF YOU NEED THE EXAM	A ADMINISTERED ORALLY		
EXAM FOR THE GRADE I ALL THE REQUIREMENTS CERTIFICATION TO NOON	LEVEL REQUESTED ABOVE AND AF S FOR TAKING SAID EXAM INCLUD WCICB, PAID THE APPROPRIATE F	NAMED PERSON, DO HEREBY MAKE PLIED FOR THROUGH NCOWCICB. I VING BUT NOT LIMITED TO HAVING SI EE FOR GRADE LEVEL SELECTED AN ALL THE INFORMATION CONTAINED	CERTIFY BY MY SIGNATURI UBMITTED A COMPLETE AP ID RECEIVED THE REQUIRE	E BELOW THAT I HAVE MET PLICATION FOR
APPLICANT SIGNAT	 URE	DATE		