

This information is for certifications that have expired past the point of renewing.

The information contained in this document is not to be used to renew a current certification.

The information contained herein is valid through 12/31/2024 and will change effective 1/1/2025.

Requirements for NCOWCICB Re-certification

Please read and follow carefully.

1. The re-certification process is required for certification holders that did not renew a certification by March 31st of the year following expiration on December 31st. Continuing education hours for classes attended prior to expiration of former certification do not count towards re-certification and required hours must be received for re-certification.
2. Complete Application for Re-Certification. You must complete the former certification information at the top of application. Do not leave any blanks. Please print or type application.
3. The following hours are required for re-certification (approved courses are listed on our website at www.ncowcicb.info class info):

Grade Level I	6 hours
Grade Level II	6 hours
Grade Level III	9 hours
Grade Level IV	12 hours
Inspector	12 hours

4. Submit Application for Re-Certification, appropriate fee, and course attendance certificate to:
NCOWCICB, mail to P O Box 132 Lawsonville NC 27022.
5. Applicants for Re-certification of Grade Level III, IV, and/or Inspector will be required to re-take the exam. A complete package including application for re-certification, re-certification fee, exam application, attendance certificate(s) must be received by NCOWCICB a minimum of fifteen (15) days prior to exam. Exam applications are available at www.ncowcicb.info under the forms tab.
6. After receiving a new certification number, the following continuing education hours will be required:

Grade Level I	3 hours
Grade Level II	3 hours
Grade Level III	6 hours
Grade Level IV	6 hours
Inspector	6 hours
Combo of Installer and Inspector	6 hours
7. After receiving continuing education hours mail in renewal to NCOWCICB by November 15th for the following year's certification.

**NORTH CAROLINA ONSITE WASTEWATER CONTRACTORS & INSPECTORS
CERTIFICATION BOARD**

APPLICATION FOR RE-CERTIFICATION

**INSTRUCTIONS FOR COMPLETING APPLICATION: PLEASE PRINT CLEARLY AND COMPLETE ALL
BLANKS IF ANY BLANKS DO NOT APPLY INSERT N/A IN THE BLANK. THE NORTH CAROLINA ONSITE
WASTEWATER CONTRACTORS AND INSPECTORS CERTIFICATION BOARD RESERVES THE RIGHT TO
REJECT ANY APPLICATION THAT IS INCOMPLETE. SEND THE COMPLETED APPLICATION WITH THE
APPLICABLE FEE (BY CHECK OR MONEY ORDER) MADE OUT TO:**

NCOWCICB P O BOX 132 LAWSONVILLE, NC 27022

The "Certification" will apply to all persons who wish to become certified as an On-Site Wastewater System Installer or as an On-Site Wastewater System Inspector as defined by Chapter 90A Article 5 of the General Statutes of North Carolina. By definition: "Contractor" means a person who constructs, installs, or repairs, or offers to construct, install, or repair an on-site wastewater system in the State, "Person" means all persons, including individuals, firms, partnerships, associations, public or private institutions, municipalities, or political subdivisions, governmental agencies, or public or private corporations organized and existing under the laws of this State or any other state or country, "Inspector" means a person who conducts an inspection in accordance with rules adopted by the Board. "Inspection" means an examination of an on-site wastewater system permitted under the provisions of Article 11 of Chapter 130A of the General Statutes, when requested by a lending institution, realtor, prospective homebuyer, or other impacted party as a condition of sale, refinancing, or transfer of title, which examination shall meet the minimum requirements established by the Board.

FORMER CERTIFICATION NUMBER ISSUED BY NCOWCICB: _____ GRADE LEVEL _____ Year Expired: _____

NAME OF APPLICANT _____
FIRST MIDDLE LAST

DATE OF BIRTH ____/____/____ (MONTH/DAY/YEAR) SOCIAL SECURITY NUMBER ____-____-____

HOME MAILING ADDRESS _____ COUNTY _____
STREET, P.O. BOX, OR RURAL ROUTE

CITY STATE ZIP CODE CELL#

HOME TELEPHONE ____ / ____ EMAIL _____

Check any that apply _____ Active Military _____ Veteran

COMPANY NAME (will appear on certification card) _____

COMPANY ADDRESS _____
STREET ADDRESS CITY ZIPCODE

MAILING ADDRESS: _____ COUNTY _____

COMPANY TELEPHONE ____ / ____ COMPANY FAX ____ / ____

FOR OFFICE USE ONLY	
PYMT AMT \$ _____	CERT # _____
GRADE LEVEL APPLIED FOR ____ GL I ____ GL II ____ GL III ____ GL IV ____ INSPECTOR	

CONTINUING EDUCATION REQUIREMENTS

All certifications expire on December 31st of each year. Renewals are due by November 15th of each year. In the year prior to renewal of certification the Applicant shall be required to submit necessary Certificates to the Board of the following education hours:

- | | | |
|-----|------------------------------------|--|
| (1) | Grade I: | Certificate of 3 hours of approved courses |
| (2) | Grade II: | Certificate of 3 hours of approved courses |
| (3) | Grade III: | Certificate of 6 hours of approved courses |
| (4) | Grade IV: | Certificate of 6 hours of approved courses |
| (5) | Inspector: | Certificate of 6 hours of approved courses |
| (6) | Combo of Installer with Inspector: | Certificate of 6 hours of approved courses |

RENEWAL OR CERTIFICATION IMPROVEMENTS

Applicants seeking renewal of Certificates shall submit evidence of required continuing education taken in the prior year and Renewal Fee for applicable Grade-level fee. Renewal fees are due by November 15th of each year. Certified persons seeking improvement or upgrade in Grade levels shall submit the necessary CE Certificate, submit proof of course completion for desired grade level, pass the exam for that grade level, and pay specific Grade level fee. Renewals postmarked after December 31st shall incur a late fee of \$25.00. Renewals postmarked after March 31st will not be processed and the certification holder must apply for re-certification.

ISSUANCE OF CERTIFICATION CARD

Upon submittal of complete Re-Certification Application, payment of applicable fees, certificate of approved education, and passing score on applicable exam the Board shall issue a Certification Card in the name of the Applicant, Company Name, Certification Number, Grade Level, and Expiration Date. The Card shall bear the Great Seal of the State of North Carolina and be signed by the Board Chair.

REVOCATION OR DENIAL OF CERTIFICATION

The Board may suspend or deny any Applicant or Certificate Holder upon findings of misconduct, violation of Laws and Rules of the State, misappropriation, or falsification of information. The Board may ask the Attorney General of North Carolina to seek injunction to restrain any person from violating the provisions of this Article or Rules adopted by the Board. Violators will be guilty of a Class 2 misdemeanor.

Check the appropriate boxes and sign below:

1. During the past three years, have any judgments, liens, lawsuits, or claims been entered or filed against the certification holder or responsible persons (including partners, officers, major shareholders, and management level employees) in the company listed on the application? yes no
2. Are there any liens for labor or materials filed on any of your projects? yes no
3. Have you or any responsible managing employee of the sole proprietorship, member of the partnership, or officers of the corporation listed on the application been convicted of a felony offense in the past three years? yes no
4. If you answered yes to either question 1, 2, and/or 3 above please attach an additional sheet with explanation

I am aware that only the certification holder, company owner(s) or W2 employees may work under the certification held. Furthermore, by my signature below I hereby affirm that no one other than those stated here shall be allowed to install or inspect using this certification.

I FURTHER AFFIRM THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE TO THE BEST OF MY KNOWLEDGE AND HEREBY AGREE UPON CERTIFICATION TO ABIDE BY THE LAWS AND RULES OF THE STATE GOVERNING ON-SITE WASTEWATER CONSTRUCTION, INSTALLTION, REPAIR, AND/ OR INSPECTION.

X _____
Signature of Applicant

Date

I CERTIFY THAT I HAVE READ AND UNDERSTAND THE "PUBLIC NOTICE STATEMENT" MAINTAINED BY THE N.C. INDUSTRIAL COMMISSION, EMPLOYEE CLASSIFICATION SECTION ON THEIR WEBSITE.

FURTHER, I HAVE _____ HAVE NOT _____ BEEN INVESTIGATED FOR EMPLOYEE MISCLASIFICATION WITHIN THE PAST TWELVE (12) MONTHS.

X _____
Signature of Applicant

Date