



# Application for Approval of a Contract Operator

Alaska Department of Environmental Conservation  
Attn.: Operator Certification Program  
410 Willoughby Ave., Suite 303  
P.O. Box 111800  
Juneau, Alaska 99811-1800

## Water System Information

Public Water System ID Number:       System Classification:

Name of Public Water System: \_\_\_\_\_

Physical Location of the Water System

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Well System Owner: \_\_\_\_\_

Number of Service Connections: \_\_\_\_\_ Number of People Served Daily: \_\_\_\_\_

Describe the water system including source water, system components, and all chemical additions:

## Contract Operator Information

The name(s) and certification number(s) of the contract operator(s) must be provided in the attached operations contract.

## Contract Operations Information

Frequency of visits by the contract operator: \_\_\_\_\_

Estimated time it takes for the contract operator to be onsite in case of emergency: \_\_\_\_\_

Mode of travel by the contract operator to the water system: \_\_\_\_\_

Is the contract operator available to respond 24 hours per day?

How is the contract operator notified of an emergency? (describe alarms, autodialers, on-call requirements)

## Onsite Operations Information

Will there be personnel onsite at the system between contract operator visits?

If "Yes",

Name of onsite personnel: \_\_\_\_\_

List any "drinking water" courses/training completed by the onsite personnel:

Describe the responsibilities of the onsite personnel in routine situations.

Describe the responsibilities of the onsite personnel in emergency situations.

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## Operations Contract

Submittal of the operations contract between the water system and contract operator is required.

The essential elements required in the operations contract include:

- Contract operator's name and certification number
- Company name, if applicable
- Water system information to include:
  - System name
  - System contact name
  - System PWSID number
  - System mailing address
- Date contract begins and ends
- List of operator responsibilities
- List of system owner responsibilities
- Signature of water system representative
- Signature of contract operator
- Date agreement is signed

Are you seeking approval of an agreement that has been in place for some time?

If "Yes", how long has this agreement been in effect? \_\_\_\_\_ years \_\_\_\_\_ months

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## Application Made by System Owner or Representative:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

Questions? Contact the Operator Certification Program at (907) 465-1139 or [dec.opcert@alaska.gov](mailto:dec.opcert@alaska.gov).