

New Mexico Environment Department Environmental Health Bureau Liquid Waste Program

LW 904E

Installer Specialist Application Form You must submit this completed application form along with all required documentation listed on the bottom of this page for your application to be deemed "complete"												
Name o				Email Address			CID Licensure you currently hold? (circle applicable)					
Name of Company			P	Phone Number				MM-98	B MS-	I M	1S-3	
Mailing	g Addres	S	C	City, State, Zip			License Expiration Date:					
Required Installer Specialist Class							Training Cl	raining Class Date:				
Have	you co	ompleted an NMED Liquid Waste	Regulation	gulation training class and passed the exam			2	YE		NO		
Professional Experience (circle applicable)												
<i>1.</i> Do you have at least 3 years of professional experience installing on-site liquid waste systems in NM? <b>YES NO</b>											NO	
	2. Have you installed or repaired at least 100 on-site liquid waste systems in NM in accordance with approved d by NMED or Bernalillo County?							with perm	its Y	ES	NO	
				ndustry or trade organization and have						ES	NO	
50 on-site liquid waste systems in NM in accordance with permits approved by NM or Bernalillo County? Approved Continuing Education Units												
Have you completed 16 hours of training credits approved by NMED for this Installer Specialist category within the past 3 years? (Note: Training CEUs must be approved by NMED to meet KSAs for this category of certification)							•	YES		NO		
Compliance and Criminal Convictions												
1 Have you been issued any Compliance Orders within the past 3 years for violation of any provision of									YES	S NO		
2. Have you had any criminal convictions pursuant to NMSA 1978, Section 74-1-10 within the past five							ve	YES		NO		
years for violation of any provision of the Liquid Waste Regulations 20.7.3 NMAC?												
sections of the regulations that pertain to performing as an Installer Specialist. By signing below, I agree that the foregoing information is true and correct.												
Instal	ler Spe	ecialist Name Printed	Installer Specialist Signature				Date					
NMED LIQUID WASTE QUALIFICATION CERTIFICATE FEE  Installer Specialist Qualification Certificate \$									150			
Total Fee Paid		Check number:	Date	Paid Payment			ved By					
Installer Specialist Application Submittal Requirements												
VEC	Applications missing the below listed items will be denied and returned without action. Circle Yes or No as applicable											
YES YES	NO NO	Installer Specialist Application Form- Completed and signed Copy of CID License – must be current and valid										
YES	NO	Letter of Experience, years licensed, years in onsite industry, other related certifications and experience										
	Copy of CEU Certificates showing 16 hours of CEUs completed within the past 3 years of this application dat											
YES	NO	All CEUs must pertain to the installation of onsite systems. Applicant must demonstrate that the CEUs have been approved for Installer Specialist by the department or include documentation that allows NMED to make determination as										
1120		whether these CEUs meet KSAs for this category of certification. Course outlines to include instructor qualifications										
may be submitted for review and approval prior to completing courses or attending conferences. Please send your complete application to:												
Michael Broussard, EHB Liquid Waste Program, 2540 Camino Edward Ortiz, Santa Fe, NM 87507; Fax 505-827-1839 For more information please contact Michael Broussard at <u>michael.broussard@state.nm.us</u> or 505-476-9125												
	r Specia	list Renewal		enied	ed							
Applicant notification, date, via, provide comments:												
Approv	ed Date		Certificate Number:				Qualif	Qualification Expiration Date:				
NMEL	) Officia	l Name Printed:	NMED Official Signature:				Date:	Date:				