

<p style="text-align: center;">Mail to:</p> <p>Division of Compliance Assistance Certification and Licensing Branch Operator Certification Program 300 Sower Blvd. Frankfort, KY 40601</p>	<p>Commonwealth of Kentucky Department for Environmental Protection</p> <p>Extension Request for Approved Continuing Education Course(s)</p> <p><i>Drinking Water Treatment, Distribution, Bottled Water, Wastewater Treatment and Collection System</i></p> <p>Telephone: 502-782-6189 eec.ky.gov/Environmental-Protection/Compliance-Assistance/operator-certification-program</p>	<p><i>For Official Use Only Do not write in this space</i></p> <p>Amount Paid: _____</p> <p>Check Number: _____</p>
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COURSE SPONSOR INFORMATION			
Sponsoring Organization		Agency Interest Number	
Key Contact Person Name		Title	
Address	City	State	Zip Code
E-Mail Address	Web Page	Business Phone Number	

GENERAL COURSE INFORMATION (All fields must be completed for extension approval.)		
Course Title	DCA Event ID Approval #	Expiration Date

An Extension Request for Approved Continuing Education Course(s) should be submitted no more than 30 days prior to the class expiration date. Extension Request Applications must be submitted with a check or money order in the amount of \$15.00 and made payable to the Kentucky State Treasurer. Applications submitted without payment will not be processed. Extension Request for Approved Continuing Education Course(s) fees are non-refundable. To submit an Extension without payment please utilize the department's ePortal for Electronic Submittal website at <https://dep.gateway.ky.gov/eportal/default.aspx>. I understand if providing online courses I may be required to provide the Cabinet with login credentials for review purposes.

INFORMATION VERIFICATION (Signature of sponsor's contact person requesting course approval)		
Printed Name	Title	Date

