

IOWA DEPARTMENT OF NATURAL RESOURCES RENEWAL APPLICATION FOR GROUNDWATER PROFESSIONAL CERTIFICATION

APPLICANT INFORMATION: (Please Print Clearly)

Applicant Name:	IA Groundwater Certification #:		
Home Mailing Address:			
City:	State:	Zip:	
Home Phone Number:			
Company Name:			
Company Mailing Address:			
City:	State:	Zip:	
Company Phone Number:	Email:		

CONTINUING EDUCATION REQUIREMENTS:

Twelve (12) hours of approved continuing education (CEUs) must be received during each two (2) year certification period (during odd numbered years). Please list below any continuing education courses you have completed that may be applicable for the renewal period. Provide the name of the course, the institution where you received the course and the number of hours. A copy of each course completion certificate must be attached to this form.

Course Name & Date Completed	Institution	Hours

RENEWAL FEE:

A non-refundable, \$200 renewal fee must accompany each renewal application. To pay via credit card, please email your completed renewal application, with required supporting documentation to <u>ustlicensing@dnr.iowa.gov</u>, and request to pay with card. To pay via check, please send the completed renewal application, required supporting documentation and fee to:

UST Licensing Iowa Department of Natural Resources 6200 Park Ave Ste 200 Des Moines IA 50321

Renewal applications must be submitted (postmarked) by December 1 to ensure your certification does not lapse.

SIGNATURE CERTIFYING INFORMATION

I certify that the information on this renewal application is true. I understand that any misrepresentation can result in revocation of the certification and civil and criminal penalties.

Signature

Date