

# OREGON ASSOCIATION OF WATER UTILITIES

P.O. Box 857, 12312 Silverton Rd. NE, Silverton, OR 97381  
Phone: (503) 873-8353 ♦ Fax: (503) 873-8538 ♦ www.oawu.net

## *Small Water System Training Course*

If your **ground water system is 150 connections or less** and is required to have a certified Small Groundwater operator this is the **DHS-DWP** required course for initial certification or re-certification.

Date:	<b><u>March 17, 2010</u></b>	<b><u>April 7, 2010</u></b>	<b><u>April 21, 2010</u></b>
Location:	Clackamas Community College Gregory Forum, Room 108-C 19600 S. Molalla Ave, Oregon City, OR 97045	City of Hillsboro City Hall, Civic Center Rooms 113B&C 150 NE Main St. Hillsboro, OR 97123	City of The Dalles Mid-Columbia Fire & Rescue 1400 W. 8 <sup>th</sup> Street The Dalles, OR 97058

### **EACH CLASS HAS A 40 MAXIMUM ATTENDANCE**

Time: 9:00 a.m. – 4:00 p.m. Lunch 12-1 on your own Please contact OAWU at (503) 873-8353 for a map to location or enter address online using your choice of a map locator web site.

Cost: **NO CHARGE**

CEUs: 0.1 CEUs for each hour (0.6 total for class) Water CEUs/ESAC: #1820

Course Description: This one-day course will cover the basics of water system operation including waterborne pathogens, water treatment, water sampling and maintenance. In addition, a review of the Safe Drinking Water Act Amendments, the State Revolving Loan Fund, as well as water system security issues. Review of technical, managerial and financial needs of a small system.

Instructors: Jason Green & Tim Tice, OAWU

**REGISTRATION POLICY: If you register and cannot attend this class, please contact OAWU at 503-873-8353 as soon as possible.**

CONFIRMATION POLICY: Please make a copy of your registration as confirmation or contact OAWU at (503) 873-8353 to request confirmation.

OAWU Pre-Registration Form - Small Water System Training Course

**Please choose location to attend:**  Oregon City– 3/17/2010;  Hillsboro –4/7/2010;  The Dalles – 4/21/2010 WEB

Name: \_\_\_\_\_ Water Operator Cert. #: \_\_\_\_\_ Position/Title: \_\_\_\_\_

Name: \_\_\_\_\_ Water Operator Cert. #: \_\_\_\_\_ Position/Title: \_\_\_\_\_

System Name: \_\_\_\_\_

Public Water System ID#: 41-\_\_\_\_\_ Number of system connections \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ System E-mail: \_\_\_\_\_

**Please return completed form to OAWU:** **PO Box 857,  
Silverton, OR 97381  
FAX: (503) 873-8538**

