

INSTRUCTIONS:

SECTION I

- Provider name:** Name of the organization or sponsor approved to provide septic tank contracting continuing education courses.
- Provider number:** Approval number issued by the department to the course provider on DH Form 4116, 07/03.
- Course title:** Title of proposed course. Must be indicative of course content.
- Course level:** Select intended course level.

SECTION II

- Course location:** Provide specific addresses and dates for the locations where the approved course will be provided.
- Course instructors
Section title:** List the full name of all instructors and their corresponding course section titles. Instructors must meet one of the following qualifications: have a minimum of three years of work experience in the subject matter to be presented, or have a four year college degree or graduate degree and related work experience, or be a master septic tank contractor, or be a state certified plumber with at least three (3) years of experience in their technical area of licensure, or be a registered septic tank contractor with at least three (3) years of experience in their technical area of licensure, or be a state certified environmental health professional with at least three (3) years of work experience in their technical area of certification. Attach documentation of qualifications for each instructor.
- Course hours:** Indicate the type and amount of training to be given in the listed areas. Course approval application fee is \$25.00 per course hour, not to exceed \$150.00 per course approval.

SECTION III

The authorized representative of approved course provider acknowledges understanding of the affirmation statement by printing, signing and dating the application.

Mail completed application to:

**DEPARTMENT OF HEALTH
BUREAU OF ONSITE SEWAGE PROGRAMS, BIN #A08
4052 BALD CYPRESS WAY, TALLAHASSEE, FL 32399-1713**