



Environmental Health Division – Aquatic Health Program

Email: aquatic@snhd.org | Phone: (702) 759-0572

Qualified Operator Registration

Registration Type: <input type="radio"/> New <input type="radio"/> Renewal <input type="radio"/> Duplicate		
Applicant Information		
Name:		Date of Birth:
Street Address:		Apartment/Suite Number:
City:	State:	Zip:
Phone Number:	Email:	
Mailing Address: Same as Above <input type="checkbox"/>		Apartment/Suite Number:
City:	State:	Zip:

Certification Information	
National Certification Testing Entity:	
Certification Number:	Expiration Date:

Attach copy of current national certification and return with application to aquatic@snhd.org or Fax: 702-759-1485

Operator registration will expire in conjunction with the national certification expiration and both must be renewed prior to expiration.

OFFICE USE ONLY	
SNHD APPROVAL BY:	DATE:
NOTES:	