

ARKANSAS WATER WELL CONSTRUCTION COMMISSION
101 EAST CAPITOL, SUITE 350
LITTLE ROCK, ARKANSAS 72201
(501) 682-1025

PROCEDURE FOR DRILLER REGISTRATION

1. The applicant should submit the following to apply for a driller registration:
 - Completed application form
 - Letter from an Arkansas Water Well Contractor - Notarized
 - Letter from a customer
 - Ten-year work history
 - Proof of two (2) years experience (W2's, registration in other states, etc.) **(In the absence of W-2's appearance before the Commission)**
 - \$25.00 application fee

2. The Commission generally meets on the first Friday in January, March, May, July, September and November of each year. **The Commission may not consider applications, received two (2) weeks or less prior to a scheduled Commission meeting, if the staff has not had adequate time to verify the information on the application.**

3. The application will be considered during a Commission meeting and the staff will inform the applicant of the Commission's decision.

4. Once the applicant has been approved to take the exam, study material will be mailed to the applicant. The applicant will have to come to Little Rock on a scheduled test date to take the exam.

5. If an applicant fails an exam, the exam can be retaken on another day. Application fees will be forfeited and a new application required if the exam is not passed within **120** days after the Commission meeting.

6. There is a \$70.00 registration fee due once the applicant passes the exam. The applicant is considered certified when the applicant passes the exam and pays the registration fee.

7. Applicants may need a water well contractor's license in addition to the driller registration. Drillers must be a water well contractor if they are not working for a water well contractor.

EXAMPLE LETTERS

A Letter from a Contractor

Doe Drilling Company, Inc.
Plain Old, Arkansas 99999
Phone (501) 999-9999

December 1, 2002

Mr. J. Randy Young, Director
Arkansas Water Well Construction Commission
101 E. Capitol, Suite 350
Little Rock, AR 72201

Dear Mr. Young:

I certify I know Mr. _____ and believe him to be of good moral character. I have personal knowledge of his ability to _____ and I believe he meets or exceeds all requirements for certification. I recommend he be issued a Registration Certificate and certified in _____. I swear and affirm that the above testimony is true.

Sincerely,

J. D. Doe, President
Doe Drilling Company, Inc.

State of _____

County of _____

Subscribed and sworn before me, a Notary Public, this _____ day of _____ 20_____.

My commission expires:

Notary Public

A Letter from a Customer

XYZZ Chemical Corporation
Product, AR 77777
Phone (501) 777-7777

December 1, 2002

Mr. J. Randy Young, Director
Arkansas Water Well Construction Commission
101 E. Capitol, Suite 350
Little Rock, AR 72201

Dear Mr. Young:

I certify I know Mr. Doe and believe that he has good moral character.

He helped to _____ on or about _____, 20__ at my business located _____ (somewhere) _____. Mr. Doe was employed by Doe Drilling at the time and I am very pleased with their work.

Sincerely,

J. R. Well Owner, CEO
XYZZ Chemical Corp.

**ARKANSAS WATER WELL DRILLER
REGISTRATION CERTIFICATE APPLICATION**

INSTRUCTIONS: Please use a typewriter to complete this form. Incomplete or inaccurate information will slow processing of your application. Applications received late or not completely processed prior to meetings, will be considered at the next meeting. For yes or no responses, circle the answer that is correct. Social Security Numbers are for identification purposes only and will not be released to the public. Applications must be signed by the applicant and notarized. Remit only test fees with this application. Be sure to complete all of the form. Make check payable to Arkansas Water Well Construction Commission (AWWCC). Attach 10-year work history with phone numbers, letter from customers, W-2s or other proof of experience.

Full Name: (First Name, Middle Initial, Last Name)		Social Security Number:		
Street Address:		Mailing Address: (If not same as street address)		
City:		County:		
State:		Home Phone Number: ()		
Zip:		Work Phone Number: ()		
Date of Birth (mm/dd/yy)	Height:	Weight:	Hair Color:	Eye Color
Sex: Male Female	Ever convicted of a felony? Yes No	US Citizen? Yes No	Resident of AR? Yes No	Can applicant read? Yes No
Circle Highest Grade Completed: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 Degrees:				
If you obtained a GED circle 12.				
Number of Years Experience in Water Well Construction?				
Have you ever had an Arkansas Water well Driller Registration Certificate revoked? Yes No				
Employed By: (Name of Business)			Contractor Number:	
Business Street Address:			City:	
State:	County:		Zip:	
List other states and license numbers where you hold a water well driller license. Also list any professional licenses or credentials you hold (i.e. Professional Geologist or Master Plumber etc.)				

Office use only

Amount	Receipt #	Issue Date	Reg. # D
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Regulations adopted July 31, 1988 require drillers to be certified for the type of construction engaged. Please check appropriate categories for which you will be tested.

	Consolidated (Includes water well construction techniques for all water wells, other than monitoring wells, constructed in rock formation in formations which will not cave, including the overburden and soils overlying consolidated formations)
	Unconsolidated (Includes water well construction techniques for all water wells, other than monitoring wells, constructed in sand, clay and gravel formations which are caving in nature)
	Hydrofracturing (includes pumping or injecting fluids, does not include the use of explosives)
	Monitoring (includes water well construction for the purpose of locating and sampling for Engineering or Geological data or sampling ground water)

Applicants must remit a \$25.00 test fee for EACH test attempted. The \$70.00 registration certificate fee will certify an applicant in one, two, three or all four categories, provided the applicant successfully passes the examination for each category.

Do **NOT** remit the \$70.00 registration certificate fee until the applicant successfully passes the examination. Remit test fees and late penalties with this application.

ABOUT THE EXAMINATIONS: Examination dates are scheduled in advance. The Commission will write you a letter after your application is approved. The letter will list the dates and give you a deadline for completing your application. **You must call and make an appointment to take the exam.** The exam will cover the Water Well Construction Act, The Water Well Construction Code Rules and Regulations and General Knowledge. Questions are multiple choice, true and false and fill in the blank (map reading questions). Exams will be graded and missed questions must be reviewed the same day of the exam. Applicants who fail to pass are not afforded the opportunity to review. Applicants pass the exam with a score of 70% or more.

I hereby certify that the information remitted on page 1 and page 2 of this form is true and correct; that I have knowledge of the Water Well Construction Act and regulations pertaining to water well construction; and that I have no less than two years experience in Water Well Construction.

Witness: _____ Signed: _____

THIS FORM MUST BE NOTARIZED

State of _____	Subscribed and sworn to before me this _____
County of _____	day of _____, 20_____
My Commission expires: _____	Signed: _____

TEN-YEAR HISTORY

List applicants' previous addresses, employer's name, address and PHONE NUMBER for last ten years.
(If student please list)

Date: From _____ To _____

Applicants Address: _____

Employer's Name _____

Supervisor: _____

Employer's Address: _____

Employer's Phone Number: _____ (_____) _____

Position Held/Job Description: _____

For Office Use _____

Date: From _____ To _____

Applicants Address: _____

Employer's Name _____

Supervisor: _____

Employer's Address: _____

Employer's Phone Number: _____ (_____) _____

Position Held/Job Description: _____

For Office Use _____

Make copies of this form and attach additional sheets if necessary.
Attach W-2s or list of registration numbers for drilling experience. Also attach copies of other professional license (i.e Geologist, Engineer, Electrical, Plumbing etc)

APPLICATION VERIFICATION COMMITTEE REPORT
DRILLER & PUMP INSTALLER REGISTRATION REQUIREMENTS

ACT 641 OF 1969:

- 18 years of age
- Good Moral Character
- Knowledge of the Rules and Regulations
- 2 Years Experience
- Examination
- Annual Registration Fee of \$70

Note: 40-hour driller course in lieu of 2 years experience removed from law in 2001 legislative session. Also, Commission directed staff to remove 40-hour pump installer course from the act as part of the revisions to the Act, in the 2003 session.

PROMULGATED RULES AND REGULATIONS:

- \$25 Examination Fee **per exam**

POLICY AND/OR STANDARD OPERATING PROCEDURES:

- Application Form
- W-2's or Proof of Experience
- Commission may request Contractor who signs letter for applicant interview if W-2 not available
- Commission requests applicant interview if W-2 not available
- Proof of license in other State's if applicable
- One letter from a licensed Arkansas water well contractor - Notarized
- One letter from a customer
- 10-year work history
- 2 years experience required by Act 641 must be within the last 10 years
- Minimum passing score on test provided in accordance with Act 641 is 70 percent (September 1991).

Revised 3/10/03