2025 Spring Solid Waste Landfill Operator Training

for New Certification

Type II and III Solid Waste Facility Operator Certification Training

This two-day course (with exam) is training for professionals pursuing careers in demolition/industrial waste, or municipal solid waste management. This course develops a level of competency to operate and inspect solid waste landfills.

The training consists of: Basic math, science, public health issues, rules & regulations, waste screening, asbestos, stormwater issues, facility operations and closure/post closure.

Successful completion of the exam is required to become a certified operator. This certification is valid for three years.

New Certification Classes

Per Minn. R. 7048.0800, subp. 1, Type II and Type III new certification registrations require an Exam Application (pg. 3 and 4 of this form) in addition to the registration form. All forms must be received at least 15 days prior to the class date. Email address on forms is mandatory.

Municipal Solid Waste Certification Courses

Type II | 15 contact hrs \$375 = \$345 Training Fee + \$15 Exam Fee + \$15 Issuance of Certification Fee

Agenda

Day 1 Training sessions 8 a.m. – 5 p.m. Day 2 Training sessions 8 a.m. – 12 p.m.

□ April 1-2, 2025

Kandiyohi County Health & Human Services Building 2200 23rd Street NE, Room 2075 Willmar, MN 56201





Demo & Industrial Certification Training

Type III | 9 contact hrs (Class limit to 15) \$375 = \$345 Training Fee + \$15 Exam Fee + \$15 Issuance of Certification Fee

Agenda

Day 1Training sessions8 a.m. - 5 p.m.Day 2Training sessions8 a.m. - 12 p.m.Certification exam1 p.m. - 4 p.m.

□ March 11-12, 2025

AmericINN by Wyndham 526 Western Avenue Fergus Falls, MN 56537

□ March 25-26, 2025

St. Louis County Public Works -Virginia Office 7823 Hwy 135 Virginia, MN 55792 Register by February 24

Register by March 10

□ April 15-16, 2025

MPCA St. Paul Office 520 Lafayatte Road St. Paul, MN 55155

□ May 13-14, 2025

Waste Management Cambridge MN Hauling 1505 11th Ave Northeast Cambridge, MN 55008 Register by March 31

Register by April 28



Registration

- No walk-in registrants will be accepted.
- Registrations that do not include the required exam application will not be accepted.
- Registration is managed on a first-come, first served basis. Registrants will be notified if their workshop is filled.
- Courses subject to cancellation due to low enrollment.
- For registration questions contact Samantha Koski 651-757-2496 or 800-657-3864 <u>samantha.koski@state.mn.us</u>

(Please copy to register more than one person.)

Complete and print this form. Mail or fax it with your payment.



DO NOT email it as an attachment with credit card information!

\$345 Training Fee + \$15 Exam Fee + \$15 Issuance of Certification Fee = \$375

Legal name (print)		
Training date & location		
Business/employer		
Business address		
City, State, ZIP		
Telephone	Email (<i>Required</i>)	
Tennessen Warning: Some of the information you are being asked to provide on this data. You are being asked to provide this information to assist the Minnesota Pollutic information. If you provide the requested information, this will assist the agency in p payment. The private information that you provide will be available only to those with persons authorized by law or court order.	on Control Agency in processing your rocessing your payment. If you do not	training payment. You are not required to provide any of the requested provide this information, the agency may be unable to process your
Credit Card		Check

		Check	
\Box American Express \Box Visa	□ MasterCard		
		Check #	
Card #	Expires		
	·	Amount	
Cardholder name	Security code	payable to:	
		Minnesota Pollution Control Agency	
Address		Mail with payment to:	
		 Minnesota Pollution Control Agency 	
City, State, ZIP		ATTN: Fiscal – 6	
		— 520 Lafayette Rd. North	
Telephone Er	nail (Required)	St. Paul, MN 55155-4194	
Amount		Fax with payment to 651-797-1385.	
Cardholder signature		- OR	
US BANK will be charging a separate service fe	e of 2.15% for all credit card transactions and	Email without payment to:	
	and a final debias and a first still be also been down	, ,	

1.25% for all debit card transactions. A separate <u>non-refundable</u> service fee will be displayed on your credit card statement, in addition to the MPCA charged training fee.

Refunds: To receive a refund for the training, you must cancel at least 48 hours before. The exam application fee is nonrefundable samantha.koski@state.mn.us to receive an invoice and link for the option to pay online. MINNESOTA POLLUTION CONTROL AGENCY

> 520 Lafayette Road North St. Paul, MN 55155-4194

Certification exam application for Type II and III waste disposal facilities Solid Waste Program

Doc Type: Certification Application

Instructions: Read this entire form and complete it in full. Incomplete applications will not be accepted. Please note the Tennessen warning on page 2.

Type II – Sanitary, modified sanitary, and sludge landfills.	MPCA Use Only	
Type III – Demolition waste and non-hazardous industrial waste	Company name:	
facilities.	Check number:	
For questions, please contact Samantha Koski at 651-757-2496 or	Amount of check:	
samantha.koski@state.mn.us.	Date of check:	
*Check certification (Required: choose one from each category below):	Date deposited:	
Operator Inspector	Exam results: Pass Fail	
*Required – choose one from below:	Exam/Issue date:	
Type II Type III	Certificate #:	

*Denotes required field

Location of exam*:

*A. General Information

Last name*:	First name*:	Middle initial:
Present position:	Employer:	
Name of landfill (if applicable):		
Home address:		
Designated mailing address:		
City: State:	Zip:	County:
Email*:		
Present MPCA participant ID #:	Business phone num	ber:

*B. Training and education Required by MN Rule 7048.0600

List all relevant short courses, in-service training, extension, individual college, courses, etc., completed during the last three years. They must relate to the type of landfill certification for which you are applying.

*Include the certification class that you are registering for to take the exam. MSW = 15 hrs, CDIW = 9 hrs

Course title	Course hours	Subject	Location	Dates

*C. Experience Required by MN Rule 7048.0600

How many months have you been employed as an operator or inspector at this type of waste disposal facility?

In what capacity?

https://www.pca.state.mn.us • 651-296-6300 • 800-657-3864 • Use your preferred relay service • Available in alternative formats w-sw1-19 • 9/13/24 Page 1 of 2

*D. Education Required by MN Rule 7048.0600

Name of high school:

Higher education

College, university or vocational school	Dates attended	Major	Credits or degree	Date of graduation

E. Inspections (Inspectors only)

List location of each inspection and name of certified inspector who accompanied you. You must complete 10 inspections in the presence of a certified inspector prior to taking the inspector exam

Name of certified inspector

*F. Certification

Tennessen warning: Pursuant to Minn. Stat. § 13.41, the information you provide on this application is classified as private data (except for your name and designated address) until the time you are licensed/certified. Once you are licensed/certified, all the information provided will be classified as public data and become part of the MPCA's public file. If you are not licensed/certified, the information provided (except for your name and designated address) will continue to be classified as not public data. You are being asked to provide the requested information to assist the MPCA in processing your application. The MPCA will use the information when determining your qualifications for obtaining a license/certification. You are not legally required to provide any of the requested information. If you supply the requested information, it will be used to process your application. If you do not supply the requested information, it will be difficult for the MPCA to determine your qualifications for licenser/certification. While your application is pending, the not public data that you submitted will be available only to authorized personnel within the agency and to those authorized or required by law or court order. In such cases, it may then be shared with other agencies, including the Minnesota Department of Revenue, the Office of the Minnesota Attorney General and persons contacted for purposes of verification or investigation. Submitting false information is grounds for denying your application or suspending, revoking, or taking other disciplinary action against your credentials after it is issued.

I declare that all information provided is true and complete. I hereby acknowledge that I have read and understand the information above.

Print name:	Title:
Signature:	Date (mm/dd/yyyy):