



Rural Water Association of Utah

Water and Wastewater Emergency Response Identification Card Application

Card Issuer/Business Name: _____

Business Address: _____

City/State/Zip: _____

Application Date: _____ Number of Cards: _____

Name/Title Representing Card Issuer (other than applicant): _____

_____ Phone #: _____

Identification is required. The card issuer is responsible for verifying the identification and certifications of its cardholders. The card issuer is responsible for keeping records of the identification cards issued and will collect the identification cards upon card expiration or termination of the cardholder. The card issuer authorizes Rural Water Association of Utah to obtain a digital passport quality photograph of each cardholder.

Cardholder Information

Last Name: _____ First Name: _____ Title: _____

Driver's License State & #: _____ Cert 1 Type/Level/#: _____

Cert 2 Type/Level/#: _____ Cert 3 Type/Level/#: _____

Cert 4 Type/Level/#: _____ Cert 5 Type/Level/#: _____

Skills: _____

Additional Information: _____

(Copy this page for additional cardholders)

Last Name: _____ First Name: _____ Title: _____

Driver's License State & #: _____ Cert 1 Type/Level/#: _____

Cert 2 Type/Level/#: _____ Cert 3 Type/Level/#: _____

Cert 4 Type/Level/#: _____ Cert 5 Type/Level/#: _____

Skills: _____

Additional Information: _____

Last Name: _____ First Name: _____ Title: _____

Driver's License State & #: _____ Cert 1 Type/Level/#: _____

Cert 2 Type/Level/#: _____ Cert 3 Type/Level/#: _____

Cert 4 Type/Level/#: _____ Cert 5 Type/Level/#: _____

Skills: _____

Additional Information: _____

Last Name: _____ First Name: _____ Title: _____

Driver's License State & #: _____ Cert 1 Type/Level/#: _____

Cert 2 Type/Level/#: _____ Cert 3 Type/Level/#: _____

Cert 4 Type/Level/#: _____ Cert 5 Type/Level/#: _____

Skills: _____

Additional Information: _____

Last Name: _____ First Name: _____ Title: _____

Driver's License State & #: _____ Cert 1 Type/Level/#: _____

Cert 2 Type/Level/#: _____ Cert 3 Type/Level/#: _____

Cert 4 Type/Level/#: _____ Cert 5 Type/Level/#: _____

Skills: _____

Additional Information: _____

Last Name: _____ First Name: _____ Title: _____

Driver's License State & #: _____ Cert 1 Type/Level/#: _____

Cert 2 Type/Level/#: _____ Cert 3 Type/Level/#: _____

Cert 4 Type/Level/#: _____ Cert 5 Type/Level/#: _____

Skills: _____

Additional Information: _____

I Authorize Rural Water Association of Utah to use the photographs and company logos provided to create Emergency Response Identification Cards for the individuals listed above. I agree to maintain records of the above mentioned identification cards and to collect the identification cards upon expiration or termination.

Signature of Representative

Date

| |
|------------------------|
| OFFICE USE ONLY |
| Badge # Series |
| Date Printed |
| Printed By |