

Operator Certification Board

P.O. Box 32089 Regina, SK S4N 7L2 www.saskocb.ca

info@saskocb.ca

Phone: 306-789-3430 Fax: 306-789-3429

Renewal Application

Renewal documents & pay	ment must be emai	led, faxed or	mailed to the	office. Drop off is not accepted.	
Operator Name	Operate	Operator Number		Certification Expiry Date	
Mailing Address	Phone	Phone Number		Employer / Facility Name	
	Email				
	Paymen	t of Rene	wal Fee		
☐ Enclose a \$150.00☐ I authorize the Ope☐ VISA☐ Mast	rator Certification Bo	oard to chargican Express	, ,	ard <u>\$150.00</u> for this application:	
Credit Card Number		Ex	Expiry Date (month/year)		
Signature of Cardholder Date		Er	Email		
of the certificates. You must	st have 1.0 CEU wit	thin your rene	ewal term or la	r certification and <u>attach copies</u> ter to meet the requirement. n our website - <u>www.saskocb.ca</u>	
Course / Workshop		Date	CEU	Office Use Only	
Operator Signature			Date		
Office Use Only					
Approved					
Denied			Date		
Comments					