



# Customer Service Inspector (CSI) Licensing Program Application Supplement

MC 178, PO Box 13088, Austin, TX 78711-3088  
Phone: (512) 239-6133 Fax: (512) 239-6272 Website: [www.tceq.texas.gov/licensing](http://www.tceq.texas.gov/licensing)

Name: \_\_\_\_\_ Date: \_\_\_\_\_ SSN (Last 4 digits): \_\_\_\_\_

**\*\*List each time your job duties/title changed (even if you are with the same employer) as a separate employer. Additional pages may be required. \*\***

**Current Employer:** \_\_\_\_\_ Job Title: \_\_\_\_\_

Your dates of employment (MM/DD/YYYY): From: \_\_\_\_\_ To: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Supervisor's Phone: \_\_\_\_\_

Check ALL job duties performed under your current employer. In some cases, a license or supervision of a licensed person is required. Please include the appropriate license information where indicated.

**Licensed Public Water System (PWS) Operator?**

License #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

PWS Name(s): \_\_\_\_\_ PWS ID Number(s): \_\_\_\_\_

- Disinfection & pressure adjustments associated with installing/repairing hydrants/meters/lines/taps
- Inspect distribution system connections/identify & correct cross-connections & backflow hazards in the PWS
- Adjust & maintain PWS disinfection system equipment & other chemical feed equipment
- Investigate & make PWS adjustments to resolve water quality concerns & pressure problems
- Operate or maintain a potable groundwater production system/groundwater well
- Operate or maintain a potable surface water or GUI treatment plant

**Licensed Irrigator License? #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_**

- Design irrigation systems including specifying backflow prevention based on potential site hazards
- Determine compliant irrigation system backflow prevention based on potential/existing site hazards including On-site Sewage Facilities (OSSFs or septic tanks) and chemical additives as listed in TCEQ rules

**Licensed Irrigation Inspector License? #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_**

- Determine compliant irrigation system backflow prevention based on potential/existing site hazards including On-site Sewage Facilities (OSSFs or septic tanks) and chemical additives as listed in TCEQ rules
- Visibly inspects the on-site installation of the irrigation system backflow preventer to determine if compliant with TCEQ rules and local code requirements

**Building Code Inspector?**

- Conduct building/construction inspections for code violations/wiring/structural specifications/fire protection

**Continue on other side...**

**Licensed Master/Journeyman Plumber?**

License Type and # \_\_\_\_\_

Original Issue Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**Other Plumbing License/Apprentice Registration?**

License Type and # \_\_\_\_\_

Original Issue Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Supervising Responsible Master Plumber's Name & License#: \_\_\_\_\_

Original Issue Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Phone #: \_\_\_\_\_

Select duties you performed requiring a journeyman or master plumber license while under supervision:

installing, changing, repairing, servicing, or renovating plumbing

performing the design, planning and superintending of plumbing

other \_\_\_\_\_

**Other Job Duties?** - Please describe how it relates to the profession: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I affirm that the above information is true and correct. I understand that fraudulent or falsified information could result in denial of this application pursuant to Tex. Admin. Code § 30.33 or revocation of my license pursuant to Tex. Water Code § 7.303.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*Entering your name in the Signature box constitutes an electronic signature and is legally equivalent to your written signature.*

**FOR TCEQ USE ONLY**

Training	Experience	Education
CSI Total Hours:	CSI:	HS/GED <input type="checkbox"/> BS <input type="checkbox"/> MS <input type="checkbox"/>
	Other:	Fee Paid <input type="checkbox"/> Military <input type="checkbox"/>

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Previous Employer: \_\_\_\_\_ Job Title: \_\_\_\_\_

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Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Supervisor's Phone: \_\_\_\_\_

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License #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

PWS Name(s): \_\_\_\_\_ PWS ID Number(s): \_\_\_\_\_

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**Licensed Irrigator License? #:** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_

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**Licensed Irrigation Inspector License? #:** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_

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**Building Code Inspector?**

- Conduct building/construction inspections for code violations/wiring/structural specifications/fire protection

**Continue on other side...**

**Licensed Master/Journeyman Plumber?**

License Type and # \_\_\_\_\_

Original Issue Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**Other Plumbing License/Apprentice Registration?**

License Type and # \_\_\_\_\_

Original Issue Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Supervising Responsible Master Plumber's Name & License#: \_\_\_\_\_

Original Issue Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Phone #: \_\_\_\_\_

Select duties you performed requiring a journeyman or master plumber license while under supervision:

- installing, changing, repairing, servicing, or renovating plumbing
- performing the design, planning and superintending of plumbing
- other \_\_\_\_\_

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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