

Matthew G. Bevin  
Governor

Charles G. Snively  
Secretary  
Energy and Environment Cabinet



Commonwealth of Kentucky  
**Public Service Commission**  
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P.O. Box 615  
Frankfort Kentucky 40602-0615  
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psc.ky.gov

Michael J. Schmitt  
Chairman

Robert Cicero  
Vice Chairman

Talina R. Mathews  
Commissioner

March 07, 2018

## PARTIES OF RECORD

RE: Case No. **2018-00083**

The Commission staff has reviewed the application in the above case and finds that it meets the minimum filing requirements and has been accepted for filing.

Enclosed please find a stamped filed copy of the first page of your filing. This case has been docketed and will be processed as expeditiously as possible.

If you need further assistance, please contact my staff at 502-564-3940.

Sincerely,

A handwritten signature in cursive script that reads "Gwen R. Pinson".

Gwen R. Pinson  
Executive Director

GP/BB

<p><b>Mail to:</b></p> <p>Division of Compliance Assistance Certification and Licensing Branch Operator Certification Program 300 Fair Oaks Lane Frankfort, KY 40601</p>	<p>Commonwealth of Kentucky Department for Environmental Protection</p> <p><b>Application for Approval of Courses for Continuing Education Credit</b></p> <p><i>Drinking Water Treatment, Drinking Water Distribution, Bottled Water, Wastewater Treatment and Collection System</i></p> <p>Telephone: 1-800-926-8111 www.dca.ky.gov/certification</p>	<p><i>For Official Use Only Do not write in this space</i></p> <p><b>RECEIVED</b></p> <p><b>FEB 26 2018</b></p> <p><b>PUBLIC SERVICE COMMISSION</b></p>
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**I. Course Sponsor Information:**Agency Interest Number: 82582

A. Sponsoring Organization (school, business, association, etc.):

Kentucky Water & Wastewater Operators Association

Key Contact Person:

Name and Title: Lisa B. Detherage, Member Services DirectorAddress: P.O. Box 700City, State and Zip: Lawrenceburg, KY 40342Phone and Fax: 502-352-0510E-mail: Lisa@kwwoa.orgWeb Page: www.kwwoa.org☒ One-Time Approval Requested☐ Two-Year Approval Requested

B. If individual requesting approval is different than the key contact person for the sponsor, please complete the following information:

Name and Title: \_\_\_\_\_

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

City, State and Zip: \_\_\_\_\_

Phone and Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

**II. General Course Information:**A. Title: 61<sup>st</sup> Annual KWWOA ConferenceB. Location and Date/s: Northern Kentucky Convention Center, April 8 – 12, 2018C. Cost per Student or Group: \$ Member - \$230 and Non-member - \$270

D. Delivery Format or Media (check those that apply):

<input checked="" type="checkbox"/> Classroom	<input type="checkbox"/> Web/Online	<input type="checkbox"/> Laboratory	<input type="checkbox"/> Exhibition
<input type="checkbox"/> Field	<input type="checkbox"/> CD-ROM	<input type="checkbox"/> Video/Audio	<input type="checkbox"/> Correspondence
<input type="checkbox"/> Other (Explain) _____			

\*Lisa B. Detherage  
Member Services Director  
Kentucky Water and Wastewater Operators  
P. O. Box 700  
Lawrenceburg, KENTUCKY 40342