TEXAS WATER TREATMENT SPECIALIST REGISTRATION
(Issued by Texas Commission of Environmental Quality – TCEQ)

☐ New Registration  ☐ Renewal
No fee required. Must be renewed annually.

Contractor Information:
License Holder Name: ____________________________________________
Home Address: __________________________________________________
   City: __________________  State: _____  ZIP: ________
Phone: (____)____________________
Email: _________________________________________________________

Business Information:
TCEQ Water Treatment Specialist (WTS) License Number: ____________________________
Business Name: _______________________________________________________
Business Address: _______________________________________________________
   City: __________________  State: _____  ZIP: ________
Business Phone: (____)______________  Business Fax: (____)______________
Business E-mail: _______________________________________________________

The following items must be submitted:
☐ TCEQ Water Treatment Specialist (WTS) License Card/Certificate – Class III license only
☐ Government Issued Photo ID
☐ Authorization Letter (if applicable)
☐ Escrow Application (if applicable)