



*In cooperation with:*

**Cocciardi and Associates, Inc.**

**[www.cocciardi.com](http://www.cocciardi.com)**

**Tuesday, November 3, 2015 (8 am-5 pm)**

**Permit Required-Confined Space Training**

**8 PA DEP Contact Hours**

**(water and wastewater operators contact hours)**

**Fox Chapel Authority  
255 Alpha Drive  
Pittsburgh, PA 15238**

**Permit-Required Confined Space Training**

Provision of 8 hour training seminar with “hands-on” exercises. Certification shall include Permit-Required Confined Space (entrant, attendant, and supervisor) in accordance with the requirements specified by the Occupational Safety & Health Administration (OSHA) at 29CFR1910.146. The class is approved for 8 contact hours through PADEP for water and wastewater operators.

For more information contact Nancy Dinger at (717) 774-8870 or  
[nancydinger@paawwa.org](mailto:nancydinger@paawwa.org)

## REGISTRATION FORM FOR THE OPERATOR TRAINING ZONE

(Photo ID required at door)

Please complete one form per attendee

- ATTENDEE: Permit Required-Confined Space Course \$135 Includes LUNCH and REFRESHMENTS**

NAME: \_\_\_\_\_

UTILITY/COMPANY: \_\_\_\_\_

PA DEP Operator Client ID # \_\_\_\_\_

TITLE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL: \_\_\_\_\_

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**Date: Tuesday, November 3, 2015 Time: 7:30 am Registration, 8 am- 5 pm Training**

**Location of Workshop: Fox Chapel Authority**

**Address: 255 Alpha Drive, Pittsburgh, PA 15238...use Map Quest for Directions**

**For more information PA-AWWA at 717-774-8870 or go to [www.paawwa.org](http://www.paawwa.org).**

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**Method of Payment:** (Confirms registration)

**Attendee Fee: \$135 Permit Required-Confined Space course Includes Lunch and Refreshments**

**\*Note: There will be an additional \$25 fee for on-site registration.**

*Make checks payable to PA-AWWA.*

**Mail** Registration and Payment to **PA-AWWA, P. O. Box D, New Cumberland, PA 17070**

**Fax** Registration with Credit Card information to: (717) 774-0288

Total Payment \$ \_\_\_\_\_

Personal Check

Company Check

Government P.O.

Master Card

Visa

American Express

Credit Card No. \_\_\_\_\_ Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_

Special Needs \_\_\_\_\_

All cancellations must be received in writing, on company letterhead, and sent to the PA-AWWA. All cancellations received 14 days prior to the event will receive a REFUND less a 25% administrative fee; fewer than 14 days prior to the event, no refunds will be granted. Substitute registrants are welcome - fax substitution requests to 717-774-0288.