



# Florida Stormwater, Erosion and Sedimentation Control Inspector Training and Certification Program



**September 12 & 13, 2012**

**Goode Park – the Captains House  
1300 Bianca Drive NE  
Palm Bay, FL**

Contact Kaylene Wheeler, NPDES Coordinator  
City of Palm Bay Public Works Department  
Stormwater Program

e-mail: [wheelk@palmbayflorida.org](mailto:wheelk@palmbayflorida.org)

321-953-8996

GET TRAINING & CERTIFICATION FROM ONE OF THE BEST  
EROSION CONTROL COURSES AVAILABLE

KEEP YOUR PROJECT IN COMPLIANCE

LEARN NEW EROSION CONTROL TECHNIQUES

**EARN 8 CONTINUING EDUCATION UNITS (CEUs) FOR CONTRACTOR'S LICENSE**

*PROVIDER NUMBER: 004-0001229 COURSE NUMBER: 0002207*

**EARN 8 PROFESSIONAL DEVELOPMENT HOURS (PDHs) FOR FLORIDA PROFESSIONAL  
ENGINEER'S LICENSE PROVIDER CEP 00110**

**FREE 2-Day Program** to obtain state certification from the Florida Department of Environmental Protection's Stormwater, Erosion, & Sedimentation Control Inspector Training Program.

Course manuals will be provided. For your own study preferences, bring pens, highlighters, and sticky notes. A proctored exam will be given on September 13, 2012.

Class will be held at the Goode Park – the Captains House, at 1300 Bianca Drive NE Palm Bay, FL 32905

Registration starts at 8:00 a.m. Class will begin at 8:30 a.m. and end at 5:00 p.m.

Lunch will be on your own!!!

**Sponsored by**

**City of Palm Bay, Public Works Department, Stormwater Program  
and the**

**Brevard County Natural Resource Management Office, Watershed Management Program**



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e-mail: [wheelk@palmbayflorida.org](mailto:wheelk@palmbayflorida.org)

Return the completed registration form via mail to Kaylene Wheeler, NPDES Coordinator, Public Works Department, 1050 Malabar Road, SW, Palm Bay, FL 32907, via email at [wheelk@palmbayflorida.org](mailto:wheelk@palmbayflorida.org), or via FAX to 321-768-6401. You MUST submit a registration form to attend, space is very limited!

## **Registration Required**

Name: \_\_\_\_\_ Affiliation: \_\_\_\_\_

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

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

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

Telephone: \_\_\_\_\_

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