

# Application for New Jersey Emission Repair Technician (ERT) Certification

Please Type or Print Legibly in Ink.

Application Type (check one):

Initial

OR

Recertification

ERT ID Number: ERT \_\_\_\_\_

ERT Expiration Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

## Part A

### All Applicants Must Complete This Page

Applicant's Name (as it appears on your driver's license or other photo identification):

Street Address:

City:

State:

Zip Code:

Home Area Code and Telephone Number (Optional):

(         )

Last 4 Digits of Social Security Number:

Driver's License Number:

Date of Birth:

Home or Work E-mail Address (at least one is required):

Employer's Full Business Name (if you have more than one employer, please attach additional sheets as necessary):

Business Street Address:

City:

State:

Zip Code:

Business Area Code and Telephone Number:

(         )

Business Area Code and Fax Number:

(         )

**Part B – Option 1**  
**Applicants Using the Automotive Service Excellence (ASE) Test Track  
Must Complete This Page**  
**(Those not choosing the ASE Test Track proceed to Part B – Option 2 on next page)**

Certification in the ASE A6, A8, and L1 tests is required. You must attach copies of your valid and unexpired ASE A6, A8, and L1 certificates to this application.

Fill in Requested Information: ASE ID #: \_\_\_\_\_

A6 (Electrical/Electronic Systems) Expiration Date: \_\_\_\_\_

A8 (Engine Performance) Expiration Date: \_\_\_\_\_

L1 (Advanced Engine Performance) Expiration Date: \_\_\_\_\_

Certification in the ASE A9 test, OR successful completion of the ETEP Section 7 Light Duty Diesel Technologies, is required. You must attach a copy of your valid and unexpired ASE A9 certificate, OR a copy of your ETEP Section 7 certificate from a NJ-approved ETEP Training Provider, to this application.

Check One and Fill in Requested Information:

A9 (Light Vehicle Diesel Engines) Expiration Date: \_\_\_\_\_

**OR**

ETEP Section 7 Light Duty Diesel Technologies Course Completion Date: \_\_\_\_\_

NJ-approved ETEP Training Provider: \_\_\_\_\_

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

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

Instructor(s): \_\_\_\_\_

Please Continue to Part C of this Application.

**Part B – Option 2**  
**Applicants Using the Emission Technician Education Program (ETEP) Education Track**  
**Must Complete This Page**

Successful completion of ETEP Sections 1 through 7, or an equivalent NJDEP-approved Original Equipment Manufacturers (OEM) training curriculum<sup>1</sup>, is required. You must attach copies of your ETEP certificate(s) or OEM training history from a NJ-approved ETEP Training Provider to this application.

NJ-approved ETEP Training Provider: \_\_\_\_\_

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

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

Instructor(s): \_\_\_\_\_

**INITIAL APPLICANTS:**  
**Complete Required Fields Below**

- ETEP Sections 1-4 Electronics/Engine Diagnosis/Repair
- ETEP Section 5 OBD I and II
- ETEP Section 6 OBDII Monitoring Failures
- ETEP Section 7 Light Duty Diesel Technologies

Final Course  
 Completion Date: \_\_\_\_\_

Note: The ASE A9 Test option below can be substituted for ETEP Section 7 above. It is OPTIONAL and **is not** required if you have ETEP Section 7 above.

- ASE A9 (Light Vehicle Diesel Engines)  
 Expiration Date: \_\_\_\_\_

**RECERTIFICATION APPLICANTS <sup>2</sup>:**  
**Complete Required Fields Below**

- ETEP Section 6 OBDII Monitoring Failures
- ETEP Section 7 Light Duty Diesel Technologies

Final Course  
 Completion Date: \_\_\_\_\_

Note: The ASE A9 Test option below can be substituted for ETEP Section 7 above. It is OPTIONAL and **is not** required if you have ETEP Section 7 above.

- ASE A9 (Light Vehicle Diesel Engines)  
 Expiration Date: \_\_\_\_\_

**SPECIAL EXCEPTIONS ARE NOTED BELOW:**

- <sup>1</sup> If you work for a NEW CAR DEALER and you have attended NJDEP-approved OEM equivalent training, attach your training information to this application.
- <sup>2</sup> If your ERT Certification expired in 2008 or earlier, you must also complete ETEP Sections 1-5 in the left hand column above. In addition, if your Training Provider was different from that noted above, please attach additional sheets with this information as necessary.

**Please Continue to Part C of this Application.**

**Part C**  
**All Applicants Must Complete This Page**

Current New Jersey Specific Informational Training OR current New Jersey Inspector Training is required. You must attach a copy of your course completion certificate from a NJ-approved ETEP Training Provider or Inspector Training Provider, or a copy of the front of your current and valid NJ Motor Vehicle Commission-issued Inspector license, to this application.

Check One and Fill in Requested Information:

2009 NJ Specific Informational Course Completion Date: \_\_\_\_\_  
NJ-approved ETEP Training Provider: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Instructor(s): \_\_\_\_\_

**OR**

2009 NJ Inspector Training Completion Date: \_\_\_\_\_  
Inspector License ID #: \_\_\_\_\_  
NJ-approved Inspector Training Provider: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Instructor(s): \_\_\_\_\_

**Release Statement and Signature - REQUIRED OR APPLICATION WILL BE RETURNED.**

By submission of this application, I hereby authorize the NJDEP, or its authorized agent, to independently verify the information contained herein. I further authorize the ETEP/Inspector Training Providers, ASE, or their designated representatives to release my official training transcripts and/or current certification status for this purpose. All information provided on this application will remain confidential.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**Please submit completed application to the address below:**

NJ ERT Application Center      **Or Fax to:** (703) 669-6123  
P.O. Box 4306  
Leesburg, VA 20177

**For Inquiries Regarding this Application:**

Toll Free Phone #: (888) 286-0313

**For All Other Inquiries:**

NJDEP: (609) 633-0639