

PHILIP D. MURPHY
Governor

Department of Environmental Protection
SITE REMEDIATION AND WASTE MANAGEMENT
Division of Waste & UST Compliance and Enforcement

SHEILA Y. OLIVER *Lt. Governor*

Mail Code 09-03 P.O Box 420 Trenton, NJ 08625-0420 Tel. (609)-633-1205 Fax. (609)-292-3970 SHAWN LaTOURETTE Commissioner

Firm Certification Application

TYPE OF LICENSE: [] REC	GULATED USTS	OR [] UNREGULATED HI	EATING OIL TANKS (UHOT)	
TYPE OF APPLICATION:	[] INITIAL	[] RENEWAL	[] MODIFICATION	
		CERTIFICATION NUMBER	CERTIFICATION NUMBER	
GENERAL FIRM INFORMAT	TION			
Firm Name				
Street Address				
(Physical Location of Firm)	No. & S	treet		
City (If company has more than one ph	State sysical location, attach a	County additional addresses. Firm certificates mu	Zip Code st be displayed at each location)	
Owners Name				
Telephone Number_	Email Address			
Mailing Address				
(If different from above)	No. & S	treet		
City	State	County	Zip Code	
	<u>CATAGORIE</u>	ES OF CERTIFICATION		
Regulated Tanks			ing Oil Tanks (UHOT)	
Cathodic Protection (check one)		Cathodic Protection	on (check one)	
[] Specialist		[] Specialist		
[] Tester		[] Tester		
[] Closure (Decommission)		[] Closure (Dec	ommission)	
[] Closure – waste oil tanks onl	У	5 3 X . 11	T	
Installation (check one)		[] Installation -	[] Installation - Entire	
[] Entire				
[] Entire – waste oil tanks only	~ (DDM)1			
[] Release Detection Monitorin	g (KDM) only			
Service Technician Tank Testing		[] Tank Testing		
[] Tank Testing – waste oil tan	ks only	[] Tank Testing		
t j ram resums waste on turn		[] Subsurface E	valuation (SSE)	
		1. 1	` /	

[] Liability Insurance OR Bond, Letter of Credit or Self-Insurance FEE SCHEDULE Initial or renewal fee = \$50 Modification fee = \$50 - change to Firm name, address or addition/removal of certification categories made not during a renewal. For modifications, firm must return the original wall certificate(s) for replacements to be issued. Each additional wall certificate = \$15 - number of extra wall certificates requested Adding or removing a certifying officer without changing the category subtypes= No fee. **CERTIFYING OFFICER(S)** A Certifying Officer is a certified individual who is either a owner, partner or officer of the firm. The certifying officer must be a full-time employee of the firm and maintain the same category of service as the category which the firm is applying for. I certify under penalty of law that the information provided in this document is true, accurate and complete. I am aware that there are significant civil penalties for knowingly submitting false, inaccurate or incomplete information and that I am committing a crime of the fourth degree if I make a written false statement which I do not believe to be true. I am also aware that if I knowingly direct or authorize the violation of any statute, I am personally liable for the penalties. [Certification pursuant to N.J.A.C. 7:14B-1.7(d)] Name Signature Title **UST Certification Number** Date Name Signature Title **UST Certification Number** Date

Name

Title

FINANCIAL RESPONSIBILITY INSURANCE

TYPE OF MECHANISM (Attach documentation coverage is current)

THIS FORM SUPERCEDES AND NEGATES ALL DOCUMENTATION PREVIOUSLY FILED. THIS INCLUDES CATEGORIES OF CERTIFICATION FOR THE BUSINESS AND OFFICERS CERTIFYING THE BUSINESS FIRM.

Signature

UST Certification Number

Date

^{*}To add more than three (3) certifying officers; copy page and attach.