

Wisconsin Department of Agriculture, Trade and Consumer Protection Division of Trade and Consumer Protection

Mail to: WDATCP, Lockbox 93598, Milwaukee, WI 53293-3598 Phone: (608) 224-4942 Email: DATCPWeightsAndMeasures@wisconsin.gov

FEE: \$35.00
FOR OFFICE USE ONLY
ACCT 272-115-1000-S1-100R-7636
DATE ISSUED:
CERT NUMBER:
DATE RECEIVED:

## TANK SYSTEM LINERS EXAMINATION APPLICATION

Wis. Stats. Chs. §§101 and 168, Wis. Stat. § ATCP 93.240

Your application will not be processed or will be de	elayed unless you:			
<ul> <li>☐ 1. Complete the application including signing and da</li> <li>☐ 2. Attach any specified documents listed on this application.</li> <li>☐ 3. Attach the specified fee listed on this application.</li> <li>NOTE: It is recommended that you make a photocopy</li> </ul>	olication.		s.	
APPLICANT INFORMATION				
NAME OF APPLICANT (first, middle, last)				YEAR OF BIRTH
STREET ADDRESS OR PO BOX	CITY		STATE	ZIP + 4 CODE
EMAIL ADDRESS (if available)	l l	PHONE (including are	a code) CE	ELL PHONE: ) -
FEE CALCULATOR				
Application Fee				\$20.00
Exam Fee (when the exam is passed, the applicant will be asked to apply for a certification and pay a \$50 certification fee)				
		Total to	Remit N	ow \$35.00
REMIT PAYMENT				
Make check payable to WDATCP and return with this WDATCP PO Box Lockbox 93598 Milwaukee, WI 53293-3598	completed and signed fo	orm to:		
RESPONSIBILITIES OF CERTIFICATION				

A person who lines or supervises the lining of tanks as a certified tank system liner shall be present at the job site for at least all of the following activities:

- Removal of product from the tanks and making the atmosphere of the tanks inert or vapor-free
- Cutting of openings in tanks
- Removal and handling of sludge and other wastes from tanks
- Sand blasting of the tank interior

- Inspection for holes and wall thickness
- Repair of holes
- Coating of tanks
- Testing for holidays
- Testing for coating hardness
- Resealing of tanks

A person who holds the certification shall carry on his or her person the certification card issued by the department while performing or conducting the activity or activities permitted under the certification.

## **EXAMINATION**

PRINT NAME OF APPLICANT

In order to obtain the certification the applicant must obtain a score of at least 70% on an examination. The exam is **open book** and will cover:

ATCP 93 - Flammable, Combustible and Hazardous Liquids Code

NFPA 30 - Flammable and Combustible Liquids Code

API 1631 - Interior Lining and Periodic Inspection of Underground Storage Tanks

API 2015 - Requirements for Safe Entry and Cleaning of Petroleum Storage Tanks

<ul> <li>Exam Materials:</li> <li>For copies of current Wisconsin administrative code books visit the DATCP website</li> <li>For NFPA materials contact the National Fire Protection Association by phone: (800) 344-3555.</li> <li>For API materials contact the American Petroleum Institute at their website: <a href="http://www.api.org/publications-standards-and-statistics">http://www.api.org/publications-standards-and-statistics</a></li> </ul>
The exam schedule is available on our website or call (608) 224-4942.
Exam applications must be received by DATCP by the due date listed on the exam schedule.
You will receive the first available exam date unless you specify a specific date here:
You will receive a notification letter with instructions from DATCP prior to the test date. Applicant must provide photo ID to
gain admittance to examination.
Please mark your first and second preferred test site locations below:*
UW Oshkosh UW Madison DATCP Madison UW Stevens Point
*We cannot guarantee a location you choose will be available.
Courses and exams are also offered at Lakeshore Technical College. For a schedule visit their website <a href="http://gotoltc.edu/">http://gotoltc.edu/</a> or contact Ruth Semph by phone: (920) 693-1167 or email: <a href="ruth.semph@gotoltc.edu">ruth.semph@gotoltc.edu</a> NOTE: You still need to complete this exam application form and submit payment to the address on page 1 in order to take the exam.
ACKNOWLEDGEMENT
By signing below, the applicant certifies that all information provided on this application is true, accurate and that the certification requirements are met.  Notice: Information including personally identifiable information collected may be used for participation surveys, eligibility for approvals, law enforcement (including child support and tax delinquency enforcement) purpose, other secondary purposes and purposes other than that for which it was originally collected. (sec. 15.04(1)(m), Wis. Stats.). The Department may also provide this information to requesters pursuant to Wisconsin's open records law, ss. 19.31-19.39, Wis. Stats. Social security numbers are required when individuals apply for a license according to Wisconsin Stats., but they may not be disclosed to anyone except other State of Wisconsin governmental agencies and must be held confidential. Social security numbers are not to be entered on this form.

SIGNATURE OF APPLICANT

DATE (MM/DD/YYYY)