UNDERGROUND TANK SYSTEM INSTALLER EXAMINATION APPLICATION


Your application will not be processed or will be delayed unless you:

☐ 1. Complete the application including signing and dating the acknowledgement
☐ 2. Attach any specified documents listed on this application
☐ 3. Attach the specified fee listed on this application

NOTE: It is recommended that you make a photocopy of the completed application for your records.

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)  PHONE (including area code)  CELL PHONE:

FEE CALCULATOR

<table>
<thead>
<tr>
<th>Application Fee</th>
<th>$20.00</th>
</tr>
</thead>
<tbody>
<tr>
<td>Exam Fee</td>
<td>$15.00</td>
</tr>
<tr>
<td>(when the exam is passed, the applicant will be asked to apply for a certification and pay a $50 certification fee)</td>
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Total to Remit Now $35.00

REMIT PAYMENT

Make check payable to WDATCP and return with this completed and signed form to:

WDATCP
PO Box Lockbox 93598
Milwaukee, WI 53293-0598

RESPONSIBILITIES OF CERTIFICATION

A person who removes or cleans or supervises the removing or cleaning of tanks as a certified tank system remover-cleaner shall be present at the job site for at least all of the following activities:

- Pre-installation tank system testing
- Inspection and repair of coatings
- Placing of bedding material and the setting and bedding of tanks
- Backfilling operations and compacting of backfill around tanks and piping
- Installation of corrosion protection systems
- Installation and testing of all connections and tank-related piping including vapor recovery, vents and supply pipes
- Installation of leak detection devices and any monitoring wells
- Testing of tanks and piping both prior to and after backfilling
- Installation of pumps and dispensers

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

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
- NFPA 30A – Code for Motor Fuel Dispensing Facilities and Repair Garages
- PEI 100 – Recommended Practices for Installation of Underground Liquid Storage Systems

Exam Materials:
- For copies of current Wisconsin administrative code books visit the DATCP website
- For NFPA materials contact the National Fire Protection Association by phone: (800) 344-3555.
- For PEI materials contact the Petroleum Equipment Institute by phone: (918) 494-9696.

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 http://gotoltc.edu/ or contact Ruth Semph by phone: (920) 693-1167 or email: ruth.semph@gotoltc.edu

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.

EDUCATION HOURS REQUIRED TO RENEW

The renewal of a certification as an Underground Tank System Installer shall be contingent upon the installer obtaining at least 12 hours of acceptable continuing education prior to the expiration date of their certification.

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.

PRINT NAME OF APPLICANT __________________________ SIGNATURE OF APPLICANT __________________________ DATE (MM/DD/YYYY) __________________________