



I can personally attest to the following work the applicant conducted concerning underground storage tanks:

Underground Storage Tank Facility Name & Address:

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Date(s) work was conducted:

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Briefly describe the type of UST work activities you conducted or were associated with that would demonstrate the applicants experience with underground storage tank regulation operations, maintenance or compliance inspections:

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I consider the applicant to be qualified for an Underground Storage Tank Compliance Inspector License.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Please mail this form directly to: Montana Department of Environmental Quality  
UST Section  
PO Box 200901  
Helena, MT 59620-0901