

MAINE BOARD OF UNDERGROUND TANK INSTALLERS

Department of Environmental Protection

17 State House Station
Augusta, Maine 04333
Telephone 207-287-2651
Attention: Theresa Scott

Please fill out and return to the address at the top of this form.

PERSONAL REFERENCE FORM

APPLICANT _____

ADDRESS _____

TELEPHONE _____

I have know this applicant from _____ to _____

My relationship with this applicant has been that of:

Employer ☐

Supervisor ☐

Co-Worker ☐ Other (Explain) ☐

	EXCELLENT	GOOD	POOR	DO NOT KNOW
Character – Personal Reputation				
Personal Integrity				
Conscientiousness				

Describe the conscientiousness, capabilities and personal integrity of the applicant:

Do you consider this applicant to be qualified for certification as an underground oil installer, inspector or remover?

☐ Yes ☐ No

If you are certified by the Board of Underground Storage Tank Installers, please write in your certification ID No. _____

SIGNATURE _____ DATE _____

MAINE BOARD OF UNDERGROUND TANK INSTALLERS

Department of Environmental Protection

17 State House Station

Augusta, Maine 04333

Telephone: 207-287-2651

Attention: Theresa Scott

Please fill out and return to the address at the top of this form

PERSONAL REFERENCE FORM

APPLICANT _____

ADDRESS _____

TELEPHONE _____

I have know this applicant from _____ to _____

My relationship with this applicant has been that of:

Employer ☐

Supervisor ☐

Co-Worker ☐ Other (Explain) ☐

	EXCELLENT	GOOD	POOR	DO NOT KNOW
Character – Personal Reputation				
Personal Integrity				
Conscientiousness				

Describe the conscientiousness, capabilities and personal integrity of the applicant:

Do you consider this applicant to be qualified for certification as an underground oil installer, inspector or remover?

☐ Yes ☐ No

If you are certified by the Board of Underground Storage Tank Installers, please list your certification No. _____

SIGNATURE _____ DATE _____

MAINE BOARD OF UNDERGROUND TANK INSTALLERS

Department of Environmental Protection

17 State House Station

Augusta, Maine 04333

Telephone: 207-287-2651

Attention: Theresa Scott

Please fill out and return to the address at the top of this form

PERSONAL REFERENCE FORM

APPLICANT _____

ADDRESS _____

TELEPHONE _____

I have know this applicant from _____ to _____

My relationship with this applicant has been that of:

Employer ☐

Supervisor ☐

Co-Worker ☐ Other (Explain) ☐

	EXCELLENT	GOOD	POOR	DO NOT KNOW
Character – Personal Reputation				
Personal Integrity				
Conscientiousness				

Describe the conscientiousness, capabilities and personal integrity of the applicant:

Do you consider this applicant to be qualified for certification as an underground oil installer, inspector or remover?

☐ Yes ☐ No

If you are certified by the Board of Underground Storage Tank Installers,
your certification ID no. _____

SIGNATURE _____ DATE _____

MAINE BOARD OF UNDERGROUND TANK INSTALLERS

Department of Environmental Protection

17 State House Station
Augusta, Maine 04333
Telephone 207-287-2651
Attention: Theresa Scott

Please fill out and return to the address at the top of this form.

PROFESSIONAL REFERENCE FORM

APPLICANT _____

ADDRESS _____

TELEPHONE _____

I have worked with this applicant from _____ to _____

Business or company you work(ed) for: _____

My relationship with this applicant has been that of:

Employer ☐

Supervisor ☐

Co-Worker ☐ Other (Explain) ☐

	EXCELLENT	GOOD	POOR	DO NOT KNOW
Character – Personal Reputation				
Quality of Professional Work				
Technical knowledge and ability				
Ability to organize projects				

Describe the conscientiousness, capabilities and personal integrity of the applicant:

Do you consider this applicant to be qualified for certification as an underground oil installer, inspector or remover? ☐ Yes ☐ No

If you are certified by the Board of Underground Storage Tank Installers, please write in your certification ID No. _____

SIGNATURE _____ DATE _____

MAINE BOARD OF UNDERGROUND TANK INSTALLERS

Department of Environmental Protection

17 State House Station
Augusta, Maine 04333
Telephone 207-287-2651
Attention: Theresa Scott

Please fill out and return to the address at the top of this form.

PROFESSIONAL REFERENCE FORM

APPLICANT _____

ADDRESS _____

TELEPHONE _____

I have worked with this applicant from _____ to _____

Business or company you work(ed) for: _____

My relationship with this applicant has been that of:

Employer ☐

Supervisor ☐

Co-Worker ☐ Other (Explain) ☐

	EXCELLENT	GOOD	POOR	DO NOT KNOW
Character – Personal Reputation				
Quality of Professional Work				
Technical knowledge and ability				
Ability to organize projects				

Describe the conscientiousness, capabilities and personal integrity of the applicant:

Do you consider this applicant to be qualified for certification as an underground oil installer, inspector or remover? ☐ Yes ☐ No

If you are certified by the Board of Underground Storage Tank Installers, please write in your certification ID No. _____

SIGNATURE _____ DATE _____

MAINE BOARD OF UNDERGROUND TANK INSTALLERS

Department of Environmental Protection

17 State House Station
Augusta, Maine 04333
Telephone 207-287-2651
Attention: Theresa Scott

Please fill out and return to the address at the top of this form.

PROFESSIONAL REFERENCE FORM

APPLICANT _____

ADDRESS _____

TELEPHONE _____

I have worked with this applicant from _____ to _____

Business or company you work(ed) for: _____

My relationship with this applicant has been that of:

Employer ☐

Supervisor ☐

Co-Worker ☐ Other (Explain) ☐

	EXCELLENT	GOOD	POOR	DO NOT KNOW
Character – Personal Reputation				
Quality of Professional Work				
Technical knowledge and ability				
Ability to organize projects				

Describe the conscientiousness, capabilities and personal integrity of the applicant:

Do you consider this applicant to be qualified for certification as an underground oil installer, inspector or remover? ☐ Yes ☐ No

If you are certified by the Board of Underground Storage Tank Installers, please write in your certification ID No. _____

SIGNATURE _____ DATE _____

MAINE BOARD OF UNDERGROUND TANK INSTALLERS

Department of Environmental Protection

17 State House Station

Augusta, Maine 04333

Telephone 207-287-2651

Attention: Theresa Scott

EXPERIENCE DATA SHEET

Describe your underground oil storage tank or underground inspection experience in the space provided below. Use one data sheet for each employer. Please supply the pertinent facts concerning the degree of responsibility, the nature of the work you performed, and the types of systems you have installed, operated, maintained, inspected, and removed.

Dates: From: _____ to: _____

Employer: _____

Telephone: _____

Supervisor's Name: _____

Present Address: _____

Current Telephone: _____

Experience: _____

MAINE BOARD OF UNDERGROUND TANK INSTALLERS

Department of Environmental Protection

17 State House Station

Augusta, Maine 04333

Telephone 207-287-2651

Attention: Theresa Scott

EXPERIENCE DATA SHEET

Describe your underground oil storage tank or underground inspection experience in the space provided below. Use one data sheet for each employer. Please supply the pertinent facts concerning the degree of responsibility, the nature of the work you performed, and the types of systems you have installed, operated, maintained, inspected, and removed.

Dates: From: _____ to: _____

Employer: _____

Telephone: _____

Supervisor's Name: _____

Present Address: _____

Current Telephone: _____

Experience: _____

MAINE BOARD OF UNDERGROUND TANK INSTALLERS

Department of Environmental Protection

17 State House Station

Augusta, Maine 04333

Telephone 207-287-2651

Attention: Theresa Scott

EXPERIENCE DATA SHEET

Describe your underground oil storage tank or underground inspection experience in the space provided below. Use one data sheet for each employer. Please supply the pertinent facts concerning the degree of responsibility, the nature of the work you performed, and the types of systems you have installed, operated, maintained, inspected, and removed.

Dates: From: _____ to: _____

Employer: _____

Telephone: _____

Supervisor's Name: _____

Present Address: _____

Current Telephone: _____

Experience: _____
