PERSONAL REFERENCE FORM

West Virginia Department of Environmental Protection DWWM/Environmental Enforcement/Tanks 601 – 57th Street SE Charleston, WV 25304

Applicant's Name:	
Address:	
Dear Recipient:	

The above named applicant is submitting an application for certification by the West Virginia Department of Environmental Protection. This certification will authorize the applicant to be directly responsible for the construction, removal, testing or upgrading of facilities which will store hazardous and toxic petroleum products. In many cases these storage systems will be in close proximity to homes and present or future groundwater supplies. You have been selected by the applicant as a person who can attest to his/her professional competency. Please do not take this request lightly. The livelihood of the applicant and the health and safety of West Virginia's people and environment depend on your honesty and integrity. Please return this form directly to the DEP.

My Name:	
Address:	
Phone:	

My relationship with the applicant has been that of:

Employer	Supervisor
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Co-worker

_____ Friend

_____ Customer

_____ Other (please specify)

	Excellent	Good	Poor	Do not know
Character - personal reputation				
Quality of professional work				
Technical knowledge and ability				
Ability to organize projects				

How long have you worked together: _____ month/year to _____ month/year

Business or company you work (ed) for:				
Working relationship, type of work, and comments:				
Do you consider this applicant to be qualified for certification installer, remover, tank tightness tester, or corrosion protect	• • •			
Yes]	No			
Please attach an additional sheet if necessary.				
Signature:	Date			
	Date:			
If you are a certified UST Class A, B, C, D, E or F worker; provide number:				

Return form directly to:

West Virginia Department of Environmental Protection DWWM/Environmental Enforcement/Tanks 601 – 57th Street SE Charleston, WV 25304 Attn.: Worker Certification