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 v	vith this applicant has been t	hat 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_____

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TELEPHONE						
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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				

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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 Addr	ess:		
Current Telep	phone:		
Experience:_			
			••••••••••••••••••••••••••••••••••••••

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