

Application for License Underground Storage Tank Contractor



STATE FIRE MARSHAL OFFICE

STATE USE ONLY

License #: _____
Date Issued: _____
Expiration Date: _____

Type of License Applied For: CLOSURE INSTALLATION BOTH

COMPANY NAME:

MAILING ADDRESS:

CITY / STATE / ZIP:

PHONE #:

FAX #:

Contact Name (Owner or Corporate Officer):

E-mail address

NAME AND CERTIFICATION # OF INDIVIDUAL(S) EMPLOYED BY YOUR COMPANY:

APPROXIMATE NUMBER OF TANK CLOSURES / INSTALLS THAT THIS COMPANY HAS:

SUPERVISED:

PARTICIPATED IN:

REMOVALS:

CLOSURE IN PLACE:

INSTALLATION:

I, _____, (print name and title) HEREBY CERTIFY THAT THE INFORMATION CONTAINED ON THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE OF APPLICANT: _____

DATE:

Submit application with the Certificate of Liability Insurance to:

STATE FIRE MARSHAL
Fuels Division
246 South 14th Street
Lincoln, NE 68508

A minimum of \$500,000.00 of General Liability Coverage is required. The certificate of insurance description must specify that the coverage includes underground storage tank work. Licenses may be renewed within thirty days of the expiration date by submitting proof of renewal of liability insurance.