

## Alabama Petroleum Equipment Contractors Association

414 Union Academy Ada Road, Ramer, AL 36069  
office: 334-288-4103 [alpec@alpec.net](mailto:alpec@alpec.net) [www.alpec.net](http://www.alpec.net)

*ALPEC is recognized as an approved certifying organization by the Alabama Department of Environmental Management (ADEM) for individuals who perform installation, closure, change-in-service, and repair of UST systems.*

### **To comply with Section (a) of ADEM's regulations Water Quality Program Chapter 335-6-15 ALPEC requires:**

Proof applicants are 18 years of age. ALPEC requires a copy of your photo ID issued by the United States government or a state of the United States with date of birth.

A Passport quality or approved photo is also required for use on the certification card. Photo may be emailed or mailed in to the above address.

Individuals must complete Form EV. This form states employment.

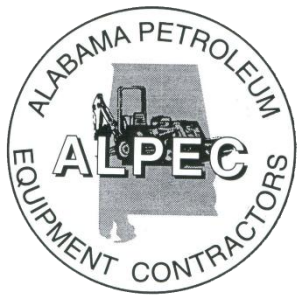
Have proof of individual financial responsibility or employer's financial responsibility as follows: (i) Individual financial responsibility or employer's financial responsibility in the amount of \$1,000,000 of general liability insurance coverage and \$1,000,000 of pollution financial responsibility that can be verified by the Department or a Department Approved Certifying Organization,

(ii) For Owners installing, closing, or repairing their own UST systems containing motor fuels, using the definition of motor fuel in chapter 335-6-16, the required financial responsibility shall be \$1,000,000 of general liability insurance coverage and \$1,000,000 of pollution financial responsibility coverage. The requirement for pollution financial responsibility may be satisfied by the Alabama Underground and Aboveground Storage Tank Trust Fund if the following conditions are met:

Section 2 of the regulations requires documentation of 3 jobs in the last 3-year period immediately prior to pursuing certification in which the individual was involved in installation, closure, or repair of UST systems that can be verified. For jobs within the state of Alabama, documentation of the name of the installer certified under this rule for each installation, closure, or repair (if the jobs were after July 16, 2012) must be provided. **Individual who are applying through ALPEC for UST—ICR Certification must complete the following Proof of Experience ( P.O.E.) forms.**

**PLEASE SEND ALL THE ABOVE TO [www.ALPEC.net](http://www.ALPEC.net)**

**All information provided is subject to verification by ALPEC and/or ADEM**



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**Employment Verification (EV)**

Name: First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Last 4 digits of DL: \_\_\_\_\_

Home Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Employed by: \_\_\_\_\_

Employer Address: \_\_\_\_\_

Employer Contact Information: \_\_\_\_\_

Date Employed: \_\_\_\_\_ **Please notify ALPEC immediately if employment is terminated.**

Previous Employer: \_\_\_\_\_ Last Date of Employment: \_\_\_\_\_

**Place a check mark beside A or B**

A. \_\_\_\_\_ The above company/individual carries at least 1 million in both general liability and pollution insurance.

B. \_\_\_\_\_ The certified individual works only on sites owned by his employer and employer has pollution coverage through the Alabama Tank Trust Fund. The above company authorizes ALPEC the right to verify employment and insurance to meet UST-ICR certification requirements.

\_\_\_\_\_

\_\_\_\_\_

Signature of Applicant

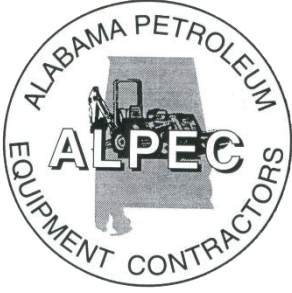
Date

\_\_\_\_\_

\_\_\_\_\_

Signature of Authorized Company Representative

Date



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**P.O.E. PROOF OF EXPERIENCE FORM**

EMPLOYED WITH: \_\_\_\_\_

Name: First: \_\_\_\_\_ Last: \_\_\_\_\_

**Job Information:** Date of Job: \_\_\_\_\_

Job type: New Construction: \_\_\_\_\_ Repair: \_\_\_\_\_ Closure: \_\_\_\_\_ Other: \_\_\_\_\_

Describe Job: \_\_\_\_\_

Job Location (Complete Address): \_\_\_\_\_

Description of applicant's duties at this site: (soil sampling does not qualify)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of Certified Individual on Job Site: \_\_\_\_\_

Position and Contact Information: \_\_\_\_\_

Certification: \_\_\_\_\_

*I certify that the information provided is true to the best of my knowledge:*

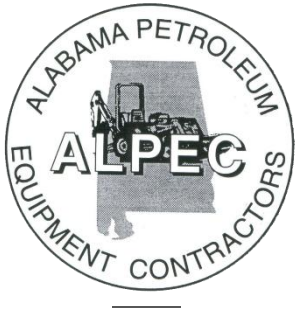
Signature of Certified Individual on Job Site: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

To be completed by ALPEC

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Additional Information: \_\_\_\_\_



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Job Location (Complete Address): \_\_\_\_\_

Description of applicant's duties at this site: (soil sampling does not qualify)

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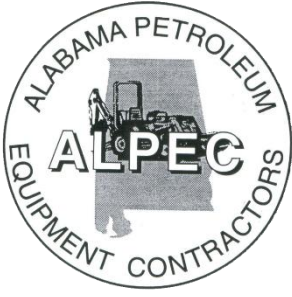
Signature of Certified Individual on Job Site: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

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Signature of Certified Individual on Job Site: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

To be completed by ALPEC	
Reviewed by: _____	Date: _____
Additional Information: _____	