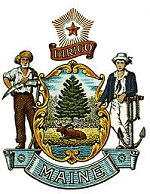
APPLICATION FOR APPRENTICESHIP VARIENCE FOR

UNDERGROUND STORAGE TANK INSTALLER



Maine Board of Underground Storage Tank Installers Department of Environmental Protection

17 State House Station

Augusta, ME 04333-0017

Web page: [www.maine.gov/dep/waste/busti/installerinspector.html](http://www.maine.gov/dep/waste/busti/installerinspector.html)

Board Staff: Matthew Shank

Office Telephone: (207) 446-8093

Office Fax: (207) 287-7826

Office Location:  
Ray Building  
28 Tyson Drive  
Augusta, Maine 04333

Revised: 07/17/2025

# APPLICATION INSTRUCTIONS

**COMPLETING THE APPLICATION FORM** – Answer all questions and return the following to this office:

* Application form (completed).
* A check for $200 made payable to: Treasurer, State of Maine and a note placed on it stating, “Variance application fee, ME Board of Underground Storage Tank Installers.
* One copy of individual facility installation forms for each installation you wish the Board to consider for your variance. You may apply for a variance to have the Board count any number of installations.
* Reference letters from the tank owner(s), your supervisors(s), and representative(s) of the authority having jurisdiction for each installation you wish the Board to consider. If these individuals are providing references for more than one installation, they need only submit one (1) letter, provided the letter identifies all installations they are commenting on.
* A copy of the regulations of the authority(ies) having jurisdiction for the installations you are seeking credit for the variance. If you are claiming multiple installations in the same jurisdiction, only one copy of the regulations are required (unless different installations were completed under different regulations).

Your application will not be considered complete until all required documents are received by Board staff. The Board’s staff may check police records to verify ethical practice by the applicant.

#### UNDERGROUND STORAGE TANK INSTALLER VARIANCE APPLICATION

Name of Applicant:

Social Security Number:

Date of Birth (MM/DD/YYYY):

Sex: Male Female Other

Email:

Home Address:

City, State, Zip:

Personal Telephone:

Business Name of Applicant:

Business Email:

Business Address:

City, State, Zip:

Business Telephone Number:

Please indicate where you wish to receive mail sent by the Board:  Home  Business

#### Installations

**Installations you wish the Board to consider for your apprenticeship variance (provide specific information on each installation on the individual facility installation forms provided.**

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| --- | --- | --- |
| FACILITY NAME | **CITY OR TOWN** | **STATE OR PROVINCE** |
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Explain why you think the regulations under which you installed the above underground oil storage facilities are no less stringent than Maine’s laws (38 MRSA Sec. 561 et seq.) and regulations (06-096 CMR c. 691) by comparing the specific elements of the regulations you used and Maine's regulations (use additional space if necessary).

I HEREBY CERTIFY THAT THIS APPLICATION CONTAINS NO WILLFUL MISREPRESENTATION OR FALSIFICATION AND THAT THE INFORMATION GIVEN BY ME IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF. I UNDERSTAND THAT MY ANSWERS MAY BE VERIFIED AND THAT I MAY BE DECLARED INELIGIBLE FOR A LICENSE IF THE INFORMATION CONTAINED HEREIN, UPON INVESTIGATION, IS FOUND TO BE MISREPRESENTED OR FALSIFIED.

Signature of Applicant

Date