



**NEW MEXICO ENVIRONMENT
DEPARTMENT**
Petroleum Storage Tank Bureau



2905 Rodeo Park Drive East, Bldg 1
Santa Fe, New Mexico 87505

Telephone (505) 476-4397 Fax (505) 476-4374

www.nmenv.state.nm.us

APPLICATION FOR AST/UST RENEWAL CERTIFICATION FOR PETROLEUM STORAGE TANKS [rev'd 11.27.12]			
<p align="center"><i>Please check the applicable certification(s) you are seeking to renew and applicable fees. Note: you may use this application to renew certification for one of both types of tanks. This is the correct form if you <u>are</u> currently certified in New Mexico.</i></p>			
Check type	Type of Certification	Date previous cert expires	Fee for application
	AST Certification		\$50.00
	UST Certification		\$50.00
Late fee if application filed after, but within 3 months of AST expiration date			\$25.00
Late fee if application filed after, but within 3 months of UST expiration date			\$25.00
<i>Total applicable fees:</i>			

Fees: All fees are non-refundable. **Do not send cash.** We accept checks or money orders only. Make your check or money order payable to: Storage Tank Fund

Send your application and fees to:

NMED Petroleum Storage Tank Bureau
Attention: Bertha Aragon
2905 Rodeo Park Drive East, Bldg 1
Santa Fe, NM 87505

Please indicate the date on which you passed your New Mexico Laws and Rules test: _____ (must be within the last 3 months). If you have not passed a Laws and Rules test within the last 3 months, your application will be rejected. To sign up for either the AST or UST test, submit payment (\$45 for each test) made out to the Storage Tank Fund. Mail your payment to the address listed above and include a cover letter with your name, the date, and location you would like to take the test(s).

Please print or type all information below:

1. Do you owe child support in New Mexico? ___yes ___no

2.	Full name:	
3.	Residence address:	
4.	Residence phone:	
5.	Cell phone:	
6.	Applicant's date of Birth:	
7.	Applicant's social security number:	
8.	Applicant's business or employer:	
9.	Business address:	
10.	Business phone:	
11.	Business email:	
12.	Applicant's or employer's CID License #	
13.	CID License ever suspended or revoked?	___yes; If yes, explain on separate sheet. no
14.	Supervisor name for installer apprenticeship:	
15.	Name of employer's company:	
16.	Supervisor's phone:	

17. Type/Number of UST(s) you have installed in past 4 years: (if applying for UST)		
	How many did you supervise?	How many did you install?
Bare/Asphalt Coated Steel		
Fiberglass		
Fiberglass Coated Steel		
Cathodically Protected Steel (STI-P3)		
Dual Containment (Excavation Liner)		
Double Wall UST		
Totals:		
18. Type/Number of AST(s) you have installed in past 4 years: (if applying for AST)		
	How many did you supervise?	How many did you install?
Steel Tanks (vertical)		
Steel Tanks (shop-built)		
Steel Tanks (field-erected)		
Steel Tanks, cathodically protected		
Vaults or Special Enclosures		
Secondary Containment (concrete)		
Secondary Containment (steel)		
Secondary Containment (geo-syn liner)		
Double Wall AST		

Totals:		
19. Type/Number of piping units you have installed in past 4 years: (both UST and AST)		
	How many did you supervise?	How many did you install?
Black Iron/Galvanized		
Copper		
Fiberglass		
Cathodically Protected Steel		
Double Wall Piping		
Totals:		

20. In addition to the information in the preceding boxes, on the next page, please provide information demonstrating that you have completed at least 2 AST or UST system installations, replacements, repairs or modifications during the last 4 years. Include copies of pertinent inspection reports (or other similar documents) for the work performed along with the name, phone number, and email contact of the supervising inspector. You may use field experience in New Mexico or in other states. Please refer to the requirements of 20.5.14.12 NMAC for additional information on the experience requirement.

21. Have you had any business or occupation license or certification suspended or revoked in this or any other state? ___ yes ___ no; If yes, please submit the date the certification was revoked or suspended and explain the circumstances on separate sheet.

Note: Within 15 days after PSTB receives this application, you will be notified whether the application is complete; please contact Bertha Aragon at 505-476-4397 for information on the status of your application.

STATE OF _____)
 _____)
 COUNTY OF _____)

I hereby state that all information submitted in this application is true and correct.

Signed: _____

SUSCRIBED AND SWORN to before me on this _____ day of _____ 201_ by

_____ (print or type name).

_____)
 Notary Public (signature)

My commission expires:

Experience information:

In the space below and on additional pages as needed, please provide information demonstrating your experience as an installer in the past 4 years. Be sure to include copies of pertinent inspection reports (or other similar documents) for the work performed, that includes the names, phone number and email contact of the supervising inspector. Please include the dates all installer work was performed. You may use field experience in New Mexico or in other states. Please refer to the requirements of 20.5.14.12 NMAC for additional information on the experience requirement.