



State of Utah
 Division of Environmental Response and Remediation
Utah Owner Operator Registration Application

Division of Environmental Response and Remediation
 195 North 1950 West
 P.O. Box 144840
 Salt Lake City, Utah 84114-4840
 (801)536-4100

Applicant Type: Initial or Renewal Registration

- Step 1:** Fill out application completely. Incomplete applications are not accepted.
 - Step 2:** Attach notarized citizenship form, copy of driver's license and training certificate. (Initial Applicant Only)
 - Step 3:** Pay \$60.00 registration fee online at DERRpay.utah.gov and print receipt to attach to application.
 - Step 4:** Email application, supporting documents and receipt to ustcertprogram@utah.gov or mail to DERR, P.O. Box 144840, Salt Lake City, UT 84114-4840. **Application and payment must be submitted 5 days prior to exam date.**
 - Step 5:** Choose exam date from available dates sent by cqualls@utah.gov after receipt of application. Testing is offered first Tuesday of each month at 9:00 AM or the third Tuesday of each month at 2:00 PM.
- ***Renewal applicants do not take exam***

Applicant Name: _____ Employer/Contractor Name: _____

Work Address: Street, City, State, Zip: _____ Employer Address: Street, City, State, Zip: _____

Contact Number: _____ Contact Number: _____

Email Address: _____ Employer Contact: _____

Operator Training Date: _____ Organization Providing Training _____

Each UST facility must have three classes of operators, A, B, and C, to perform specific duties and help ensure that UST systems remain in compliance and protects human health and the environment. Please list all facilities you may be responsible for as a class A or B operator and check if you are the primary. **Each facility should have ONLY ONE "Primary A" and ONE "Primary B" Operator. Do not check "Primary A" or "Primary B" if you are a backup. If you are the Primary A or Primary B Operator, you will be required to be re-trained if any of the listed facilities are found to be out of compliance under UAC R311-201-12(k).** List additional facilities on back of this form. You only need to list each facility once.

Facility ID	Facility Name	Facility Address	Backup A and/or B	Primary A and/or B
			<input type="checkbox"/> A <input type="checkbox"/> B	<input type="checkbox"/> A <input type="checkbox"/> B
			<input type="checkbox"/> A <input type="checkbox"/> B	<input type="checkbox"/> A <input type="checkbox"/> B
			<input type="checkbox"/> A <input type="checkbox"/> B	<input type="checkbox"/> A <input type="checkbox"/> B
			<input type="checkbox"/> A <input type="checkbox"/> B	<input type="checkbox"/> A <input type="checkbox"/> B
			<input type="checkbox"/> A <input type="checkbox"/> B	<input type="checkbox"/> A <input type="checkbox"/> B
			<input type="checkbox"/> A <input type="checkbox"/> B	<input type="checkbox"/> A <input type="checkbox"/> B
			<input type="checkbox"/> A <input type="checkbox"/> B	<input type="checkbox"/> A <input type="checkbox"/> B
			<input type="checkbox"/> A <input type="checkbox"/> B	<input type="checkbox"/> A <input type="checkbox"/> B
			<input type="checkbox"/> A <input type="checkbox"/> B	<input type="checkbox"/> A <input type="checkbox"/> B

I hereby certify that the above information is true and that I have read the UST Operator Training and Registration requirements for Class A and B Operators in the Utah Administrative Code R311-201-12. I understand that submission of false or misleading information on this application may result in rejection of the registration.

Signature _____ Date: _____

For State Use Only

Registration # OA _____ # OB _____ Expiration Date _____

Training and Citizenship Form Confirmed: Yes or No

Date Passed _____ Date Fee Processed _____ Order # _____

Proof of Citizenship

Applicants for this certification or registration are required to provide proof of citizenship. Please complete the following:

- Fill out this form.
- Attach a copy of your government issued photo ID.
- Have this document notarized.

OR

- Check here to indicate you have previously submitted a citizenship form to the DERR.
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***Utah Department of Environmental Quality
Certification Pursuant to UCA 63G-12-104***

I, _____, hereby certify under penalty of perjury that I am:
Full Name

- A United States citizen. (must have copy of government issued photo ID attached)

OR

- A qualified alien as defined in 8 USC, Sec. 1641, and lawfully present in the United States.

Alien ID #: _____

Dated this _____ day of _____, 20____.

Applicant's Full Name: _____

Address: _____

Applicant's Signature: _____

SUBSCRIBED AND SWORN to before me this _____ day of _____, 20____.

Government Issued
PHOTO ID

(Place copy here)
(Driver's License, Passport, Permanent
Resident Card, etc.)

(May attach copy)

NOTARY PUBLIC

My commission expires: _____