



## State Water Resources Control Board

## OFFICE OF TANK TESTER LICENSING DIVISION OF WATER QUALITY

1001 I Street, Sacramento, CA 95814 Mailing Address: P.O. Box 2231, Sacramento, CA 95812 Phone Number: (916) 324-7493

Internet Address: <a href="http://www.waterboards.ca.gov">http://www.waterboards.ca.gov</a>
Email Address: <a href="http://www.waterboards.ca.gov">OTTL@waterboards.ca.gov</a>

## APPLICATION TO RENEW STATE WATER RESOURCES CONTROL BOARD TANK TESTER LICENSE

(Rev. 06/2023)

Renewal Fee: \$600.00

This application shall be used to renew an existing State Water Resources Control Board (State Water Board) Tank Tester License (license). Please complete this application and return it to the Office of Tank Tester Licensing, Division of Water Quality, State Water Resources Control Board, P.O. Box 2231, Sacramento, CA 95812, ATTN: Kaitlin Cottrell along with two 1-inch by 1-inch color photographs (taken within one year of submitting application), the renewal fee of \$600.00 (check made payable to State Water Resources Control Board), and current manufacturer training certificate(s) for tank and pipe integrity testing methods and equipment. If your application is postmarked after the expiration date on your license, you will be required to pay a reinstatement fee of \$200.00 in addition to the renewal fee.

Application begins at the top of Page 2 and continues through to Page 4. Completely fill out each section of the application starting with *APPLICANT INFORMATION* and finishing with *APPLICANT CERTIFICATION*. If information is missing from the application, the application will be deemed deficient and returned to the applicant delaying license renewal process.

-This Space Intentionally Left Blank-

E. JOAQUIN ESQUIVEL, CHAIR | EILEEN SOBECK, EXECUTIVE DIRECTOR

Application <sup>a</sup>	to Rei	new L	icense
--------------------------	--------	-------	--------

Pag	e <b>2</b>	of	4

Select box if you wish the Office of Tank Tester Licensing (OTTL) to send correspondence to residential address.
APPLICANT INFORMATION
Last Name:
First Name:
Personal Email Address:
Personal Contact Number:
Residential Address:
Tank Tester License Number:
Select box if you wish the OTTL to send correspondence to company address.
EMPLOYER INFORMATION
Company Name:
Company Contact:
Email Address:
Telephone Number:
Company Address:

The information identified in the *APPLICANT INFORMATION* section is used by the OTTL for correspondence purposes. The OTTL will publish your name, city, state, tank tester license number, and tank and pipe integrity test method(s) and expiration date(s) in <u>Local Guidance (LG) 105</u>

(https://www.waterboards.ca.gov/water\_issues/programs/ust/leak\_prevention/lgs/105\_1 2.html).

Select box if you have no tank testing equipment information.				
TANK TESTING EQUIPMENT INFORMATION (Include all information for tank testing equipment you use. If you utilize more than one type of equipment, please list all. If necessary, attach additional page(s))				
Refer to <u>LG 113</u> (https://www.waterboards.ca.gov/water_issues/programs/ust/leak_prevention/lg 113/index.html) before proceeding. Tank testing equipment you use shall be listed as approved for use in California (CCR, title 23, division 3, chapter 16, section 2643(f)).				
Equipment Manufacturer #1:	Equipment Manufacturer #2:			
Equipment Model #1:	Equipment Model #2:			
Expiration Date of Manufacturer Training Certificate #1 (Attach a copy of certificate):	Expiration Date of Manufacturer Training Certificate #2 (Attach a copy of certificate):			
Select box if you have no pipe testing equipment information.				
PIPE TESTING EQUIPMENT INFORMATION (Include all information for pipe testing equipment you use. If you utilize more than one type of equipment, please list all. If necessary, attach additional page(s))				
Refer to <u>LG 113</u> (https://www.waterboards.ca.gov/water_issues/programs/ust/leak_prevention/lg 113/index.html) before proceeding. Pipe testing equipment you use shall be listed as approved for use in California (CCR, title 23, division 3, chapter 16, section 2643(f)).				
Equipment Manufacturer #1:	Equipment Manufacturer #2:			
Equipment Model #1:	Equipment Model #2:			
Expiration Date of Manufacturer Training Certificate #1 (Attach a copy of certificate):	Expiration Date of Manufacturer Training Certificate #2 (Attach a copy of certificate):			

Upon expiration date of manufacturer training certificate(s) listed above for tank and pipe integrity test method(s) and equipment, you are required to submit updated copies of current certificate(s) to <a href="https://oxy.org/nct/ox

APPLICANT CERTIFICATION
I declare under penalty of perjury that the information I have supplied on this application is true and correct to the best of my knowledge.
Applicant Signature:
Date Application Signed:

Return this completed application along with supporting documentation to:

Office of Tank Tester Licensing
Division of Water Quality
State Water Resources Control Board
P.O. Box 2231
Sacramento, CA 95812
ATTN: Ms. Kaitlin Cottrell