



## Statement of Training for Underground Storage Tank Facility Operators

Facility ID# 0110819 Site ID# 199708016Facility Name Vernondale StoreFacility Location 1526 RTE 114Facility Town/City North Sutton**Class A Operator**Name Robert DeFeliceTraining Date 01/03/2013Expiration Date 01/03/2015Class A operator Signature Robert DeFelice Date 1/10/13**Class B Operator**Name Robert DeFeliceTraining Date 01/03/2013Expiration Date 01/03/2013Class B operator Signature Robert DeFelice Date 1/10/13**Owner**Name Robert DeFeliceOwner Address P.O. Box 536Owner City and State North Sutton NHOwner Signature Robert DeFelice Date 1/10/13Name of Approved Training Program Underground Storage Tank Class A and B Operator

Date of Training Program Approved \_\_\_\_\_

By signing this document you certify under penalty of law that you are familiar with the information submitted, and you believe that the submitted information is true, accurate and complete.

1. Keep a completed copy of this form for owner/operator records.
2. The owner/operator must submit a copy of this to NHDES.

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