



Underground Storage Tank (UST) Facilities A/B Operator Statement of Training Record



OIL REMEDIATION AND COMPLIANCE BUREAU

PO BOX 95 CONCORD NH 03302-0095

Phone # (603) 271-3899 Fax # (603) 271-2181

New Hampshire RSA 146-C:17-21

Facility ID # 0-110079 NHDES Site ID #Facility Name Canterbury GolfFacility Location 125 West RoadFacility Town/City Canterbury, NHName of Approved Training Program State of NH

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

Class A OperatorName Lauren SimonsTraining Date 11/4/21Expiration Date 11/4/23Class A operator Signature [Signature]

Date

Class B OperatorName Same as above

Training Date

Expiration Date

Class B operator Signature [Signature]

Date

OwnerName CRTH Inc.Owner Address 67 MainOwner City and State Miller Tn. NYOwner Signature [Signature]

Date

UNDER PENALTY OF LAW, by signing this document you certify that the information submitted is accurate and true to the best of your knowledge and belief.

[Signature]