**Colorado**

**Class C Underground Storage Tank Operator Training Certification**

As a Class C underground storage tank (UST) operator you will be the first line of response if events indicating emergency conditions are present. You are responsible for responding to alarms or other indications of emergencies caused by spills or releases from UST systems.

Facility: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This document certifies that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_has been trained by a Certified Colorado Class A or B UST Operator as a Class C Operator in accordance with the Colorado Department of Labor and Employment, Division of Oil and Public Safety, Storage Tank Regulations (7 C.C.R. 1101-14), Section 2-7-5(b). Relative to the forgoing facility, at a minimum this person has been trained in the following:

* Operating and monitoring the fueling system and fueling activities
* Responding to alarm conditions on the tank monitoring system including:
	+ Overfill Alarms
	+ Low Product Alarms
	+ High Water Alarm
	+ Liquid Sensor Alarms
	+ Line Leak Alarms
	+ Periodic Tank Fail Alarms
* Responding to emergencies situations posing an immediate danger or threat to the public or to the environment and that require immediate action:
	+ Responding to fire emergency
	+ Responding to a medical emergency
	+ Responding to leaks
	+ Responding to spills
	+ Responding to overfills
* Responding to unusual operating conditions
	+ Slow flow and automatic shut down conditions
	+ Electrical breakers tripping
	+ Smoke or fire coming from fueling or electrical equipment
	+ Large inventory discrepancies
	+ Damaged or compromised equipment
* The location of the emergency stop button(s)
* The location of the fire extinguisher(s)
* The location of the spill kit
* Location of emergency contact information sheet

**Certification of Training**

By signing this document the qualified trainer (Colorado Certified A or B UST Operator) certifies that they have trained this employee in the above.

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Certified A or B Operator Signature Date Printed Name

By signing this document the employee certifies that they have been trained in the forgoing.

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Employee Signature Date Printed Name

***Note: A copy of this document must be retained on site and be available for inspection***