



Tightness Tester Business License Application

Any business who performs, or employs individuals who perform, tightness testing on any underground storage tank (UST) or product piping (primary and interstitial space), is required to be licensed by RI DEM. Licenses are issued on an annual basis and expire on September 30th of every year. There is currently no fee for a business tightness license. Any tightness test performed by an individual or business who is not licensed is considered invalid and will not be accepted. Submit this application, along and applicable documentation to:

Office of Land Revitalization and Sustainable Materials Management - UST Division
ATTN: Kevin Gillen
Department of Environmental Management
235 Promenade Street
Providence, Rhode Island 02908-5767

Business Name:

Business Physical Address: City: State:

Mailing Address: City: State:

Primary Contact Name: Primary Contact Title:

Primary Contact E-mail: Primary Contact Phone #:

Answer the Following Questions:

What individual or business owns the test equipment used?

Who is responsible for test equipment calibration and maintenance?:

List all Licensed Testers Employed by Company in the Table below: (if you need additional space, attach a separate sheet of paper)

Licensed Tester Name	Method(s) Licensed In
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Each tester is also required to be licensed by RI DEM.

For more information, call (401) 222-2797

Attach the Following to this application:

- A copy of a certificate of liability insurance consistent with the amounts and coverages as specified in Rule 1.16(D)(1)(c) of the UST Regulations
- A list of all testing-related equipment owned by the business, including Manufacturer, Model, serial number, and date of last calibration
- Copy of the most recent calibration certificate for each piece of testing equipment. For equipment that cannot be calibrated, you must provide documentation that the equipment is accurate to within 1% of known values when tested

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the information submitted is true, accurate and complete. I understand that falsifying information, including submittal of false test results may result in revocation of your license and potential civil and/or criminal penalties.

Name and Title of Signatory: Date Signed

Signatory Signature: