



Wisconsin Department of Agriculture, Trade and Consumer Protection
 Division of Trade and Consumer Protection

Mail to: WDATCP, Lockbox 93598, Milwaukee, WI 53293-0598

Phone: (608) 224-4942 Email: DATCPWeightsAndMeasures@wisconsin.gov

FEE: \$35.00
FOR OFFICE USE ONLY
ACCT 272-115-1000-S1-100R-7636
DATE ISSUED:
CERT NUMBER:
DATE RECEIVED:

TANK-SYSTEM SITE ASSESSOR EXAM APPLICATION

Wis. Stats. Chs. [§§101 and 168](#), Wis. Stat. [§ ATCP 93.240](#)

Your application will not be processed or will be delayed unless you:

- 1. Complete the application including signing and dating the acknowledgement.
- 2. Attach the specified fee listed on this application.
- 3. Attach any specified documents listed on this application.

NOTE: It is recommended that you make a photocopy of the completed application for your records.

APPLICANT INFORMATION

NAME OF APPLICANT (first, middle, last)			YEAR OF BIRTH
STREET ADDRESS OR PO BOX	CITY	STATE	ZIP + 4 CODE
EMAIL ADDRESS (if available)	PHONE (including area code) () -	CELL PHONE: () -	

FEE CALCULATOR

Application Fee	\$20.00
Exam Fee (when the exam is passed, the applicant will be asked to apply for a certification and pay a \$50 certification fee)	\$15.00
Total to Remit Now	\$35.00

REMIT PAYMENT

Make check payable to WDATCP and return with this completed and signed form to:
 WDATCP
 PO Box Lockbox 93598
 Milwaukee, WI 53293-0598

RESPONSIBILITIES OF CERTIFICATION

A person who holds the certification shall carry on his or her person the certification card issued by the department while performing or conducting the activity or activities permitted under the certification.

EXAMINATION

In order to obtain the certification the applicant must obtain a score of at least 70% on an examination. The exam is **open book** and will cover:

- [ATCP 93 – Flammable, Combustible and Hazardous Liquids Code](#)
- [Assessment and Reporting of Suspected and Obvious Releases From Underground and Aboveground Storage Tank Systems \(a.k.a. TSSA Guide\)](#)

Exam Materials:

For copies of current Wisconsin administrative code books and TSSA guide visit the DATCP [website](#)

The exam schedule is available on our [website](#) or call (608) 224-4942.

Exam applications must be received by DATCP by the due date listed on the exam schedule.

You will receive the first available exam date unless you specify a specific date here: _____

You will receive a notification letter with instructions from DATCP prior to the test date. Applicant must provide photo ID to gain admittance to examination.

*Please mark your first and second preferred test site locations below:**

_____ UW Oshkosh _____ UW Madison _____ WCTC Waukesha _____ UW Stevens Point

*We cannot guarantee a location you choose will be available.

ACKNOWLEDGEMENT

By signing below, the applicant certifies that all information provided on this application is true, accurate and that the certification requirements are met.

Notice: Information including personally identifiable information collected may be used for participation surveys, eligibility for approvals, law enforcement (including child support and tax delinquency enforcement) purpose, other secondary purposes and purposes other than that for which it was originally collected. (*sec. 15.04(1)(m), Wis. Stats.*). The Department may also provide this information to requesters pursuant to Wisconsin's open records law, *ss. 19.31-19.39, Wis. Stats.* Social security numbers are required when individuals apply for a license according to Wisconsin Stats., but they may not be disclosed to anyone except other State of Wisconsin governmental agencies and must be held confidential. Social security numbers are not to be entered on this form.

PRINT NAME OF APPLICANT

SIGNATURE OF APPLICANT

DATE (MM/DD/YYYY)