

Application for Registration with the Petrofund Board as a Contractor

Under Minnesota Statutes Chapter 115C.11, all contractors who perform corrective action services in response to a petroleum tank release must register with the Petrofund Board. "Contractor" means an individual, partnership, association, private corporation, or any other legal entity that actually performs contractor services, which are services within a scope of work that can be defined by typical written plans and specifications, such as excavation, treatment of contaminated soil and groundwater, drilling, laboratory analysis, professional surveying, electrical work, plumbing, and carpentry. As part of complying with the required registration criteria, contractors must complete this form and submit it together with the indicated documentation.

Registration is effective 30 days after a complete application is received by the board and expires every year on 31 December. Prior to its annual expiration, a registration remains in force until voluntarily terminated by the registrant or until suspended or revoked by the Commissioner of Commerce or the Petrofund Board. If you have questions, please contact the Petrofund Information Line at 651-539-1515 or 800-638-0418. *Re-registration is available from 1 Oct-31 December each year to prevent lapse in registration. All registrations received after 31 December will be subject to a lapse in registration. Work completed during a lapse could be penalized as "unregistered".**

1. APPLICANT INFORMATION

Full name of legal entity applying for registration:

Doing Business As (DBA): _____

Address _____

City _____ State _____ Zip _____ County _____

Phone _____ Email _____

Primary contact _____

Legal Entity (check one)

☐ Sole Proprietorship

☐ Limited Liability Partnership

☐ General Partnership

☐ Limited Partnership

☐ Corporation

☐ Limited Liability Company

☐ Other legal entity

***If you are a legal entity that is required to be registered with the Office of the Minnesota Secretary of State, your registration with their agency must be current in order to file or renew your Petrofund registration.**

Background Questions

1. Has the legal entity, or any owner, partner, officer, director or manager of the legal entity, ever been convicted, whether by pleading guilty, with or without admitting guilt, or pleading nolo contendere, of any of the following offenses: any felony; any gross misdemeanor; or a misdemeanor involving: (a) assault; (b) harassment; (c) moral turpitude; or (d) conduct similar to items (a) to (c)?

- ☐ Yes. Please provide a detailed description of the offense(s), including documentation.
☐ No.

2. Has the legal entity, or any owner, partner, officer, director or manager of the legal entity, ever been subject of an order revoking, suspending, restricting, limiting, or imposing other disciplinary action against the legal entity's license or certification in another state or jurisdiction?

- ☐ Yes. Please provide a detailed description of the order(s), including documentation.
☐ No.

2. BRANCH OFFICES

Please provide the following information for any branch offices that perform work at cleanup sites in Minnesota. Attach additional sheets if necessary.

Address _____
City _____ State _____ Zip _____ County _____
Phone _____ Email _____
Primary contact _____

Branch Office #2

Address _____
City _____ State _____ Zip _____ County _____
Phone _____ Email _____
Primary contact _____

Branch Office #3

Address _____
City _____ State _____ Zip _____ County _____
Phone _____ Email _____

Primary contact_____

3. CERTIFICATION

As legally certified with the authorized signature below, the legal entity identified in Part I above makes this application for registration with the Petrofund Board as a contractor and:

- certifies knowledge of and agrees to abide by the requirements of Minnesota Statute Chapter 115C and Minnesota Rule 2890;
- agrees to retain and make available for inspection all corrective action records for seven years; and
- agrees to file a corrected application for registration within 30 days if any of the information in this application becomes inaccurate or incomplete in any material respect.

NOTARIZATION

Authorized signature

Subscribed and sworn to before me this____day of _____, 20_____.

Name (print)_____ [Stamp]

Title_____ Notary Public_____

Date signed_____ Commission Expiration Date_____

4. FORM SUBMITTAL INSTRUCTIONS

Submit this completed form that has been signed, dated and notarized. **Please note that original signatures are no longer required.**

MAILING ADDRESS:

Minnesota Department of Commerce – Petrofund
85 Seventh Place East, Suite 280
St Paul, MN 55101-2198

EMAIL ADDRESS: petrofund.commerce@state.mn.us

FOR OFFICE USE ONLY: Petrofund Contractor Registration Number_____