



# CERTIFICATE OF TRAINING

Brandon Smith

Has successfully completed  
Illinois UST Class C Operator Training

Issued on:  
04-02-2026

Expires 04-02-2030

A handwritten signature in black ink, appearing to read "Raymond Rees", is positioned above a blue ribbon banner.

Raymond Rees

Trainer

Circle K

10258 s. Kedzie

Evergreen Park, IL 60805

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# UST Class C Operator Training Orientation Checklist

This orientation is to be performed by a manager or Class A/B operator at the Class C operator's facility. It will familiarize the trainee with the various site-specific components of the facility and relate them to the content discussed in the PASS UST Class C Operator Training Course.

## FACILITY INFORMATION

Facility Name: Circle K

Facility Address: 10258 s. Kedzie Evergreen Park, IL 60805

**I, the Class C Operator, know where the following components are located and how to operate them.**

- |                                                                       |                                                                      |
|-----------------------------------------------------------------------|----------------------------------------------------------------------|
| <input checked="" type="checkbox"/> All the E-Stops (Emergency Stops) | <input checked="" type="checkbox"/> Emergency Procedures and Numbers |
| <input checked="" type="checkbox"/> The Tanks and Manways             | <input checked="" type="checkbox"/> The Nozzle                       |
| <input checked="" type="checkbox"/> Fire Extinguisher                 | <input checked="" type="checkbox"/> The Swivel                       |
| <input checked="" type="checkbox"/> All Sensitive Receptors           | <input checked="" type="checkbox"/> The Breakaway                    |
| <input checked="" type="checkbox"/> All the Dispensers                | <input checked="" type="checkbox"/> The Spill Kit and Contents       |
| <input checked="" type="checkbox"/> The Hose                          | <input checked="" type="checkbox"/> The Tank Monitor (If Applicable) |

**I, the Class C Operator, know the following information**

- |                                                                          |                                                                    |
|--------------------------------------------------------------------------|--------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Who to notify in an emergency        | <input checked="" type="checkbox"/> What to do about an alarm      |
| <input checked="" type="checkbox"/> What to do if there is a spill       | <input checked="" type="checkbox"/> Where the spill kit is located |
| <input checked="" type="checkbox"/> Where the shut-off switch is located | <input checked="" type="checkbox"/> What the fueling rules are     |

## CERTIFICATION

*With my signature below, I certify that the employee listed on this form has been trained on all the topics mentioned above and they have shown how the content discussed in the PASS UST Class C Training Course can be applied to their assigned facility site.*

Manager/Trainer/A/B Operator: \_\_\_\_\_ Date Signed: \_\_\_\_\_

Signature: \_\_\_\_\_

Class C Operator Name: Brandon Smith Date Signed: 04-02-2026

Class C Operator Signature: *digitally signed by Brandon Smith*

**KEEP THIS DOCUMENT FOR YOUR RECORDS**

Please store this document and a copy of the Certificate of Training at the facility