



# CERTIFICATE OF TRAINING

**Braxton Stevens**

Has successfully completed  
**Kansas UST Class C Operator Training**

Issued on:  
**05-29-2023**

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

**Raymond Rees**

Trainier

Hyvee Fast and Fresh

3905 W 24th Pl

Lawrence, KS 66047

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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: Hyvee Fast and Fresh

Facility Address: 3905 W 24th Pl Lawrence, KS 66047

**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: Braxton Stevens Date Signed: 05-29-2023

Class C Operator Signature: *digitally signed by Braxton Stevens*

**KEEP THIS DOCUMENT FOR YOUR RECORDS**

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