

PENNSYLVANIA MACHINE RUNNER'S CERTIFICATION

Attached is an application for Pennsylvania Machine Runner's Certification.

Be certain to fill this form out completely and attach copies of any certificates you have from other states. You must include signatures of a superintendent and mine foreman to verify that you have no less than one year's practical experience as a miner or served as a miner's apprentice for a period of not less than one year. In lieu of this, a <u>signed</u> verification on company letterhead in regards to your mining experience may be substituted.

To arrange testing:

After completion of application and obtaining signatures of mine officials, contact the <u>state</u> <u>mine inspector for your mine to arrange testing.</u>

If the underground experience you are verifying is at an active mine, you must obtain signatures of both the Superintendent and the Mine Foreman, or obtain a signed verification on company letterhead signed by the Manager of Human Resources. If the experience was at a mine that has closed, verification may be obtained by the signature of a certified mine official at that mine who can verify the experience stated on the application. Please include the mine official's certification number, along with their address and telephone number.

There is no fee for this certification.



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF MINE SAFETY

BITUMINOUS MACHINE RUNNER'S APPLICATION AND QUALIFICATION FORM

Name of Applicant		Social Security Number	
Address		Phone Number	
Place of Birth		Date of Birth	
Name of Company Employed By		Name of Mine Employed At	
Miner's Certificate Number			
MINING EXPERIENCE			
Name of Mine	Type of Experience		Length of Service
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QUALIFICATIONS			
Machine Runner – Must possess Miner's Certificate and have 6 months experience as helper to a Machine Runner.			
CERTIFICATION			
This is to certify that the above named applicant, to the best of my knowledge, possesses the experience set forth in this application and is hereby recommended for the certification desired.			
Total Length of Time in Mine		Total Length of Time as Machine Helper	
Signature of Applicant			
Signature of Employer			
Signature of Mine Superintendent			
Signature of Mine Foreman			
For Official Use:			
Inspector		District	
Place of Examination Date of Examination			
Date of Certification Number of Certificate Issued			

