Supervisory Fuel Safety Training & Confirmation Form

14 CFR Part 139.321(f) requires "Each certificate holder must obtain a written confirmation once every 12 consecutive calendar months from each airport tenant fueling agent that the training required by paragraph (e) of this section has been accomplished. This written confirmation must be maintained for 12 consecutive calendar months."

139.321(e)(1)

In accordance with the requirements of 14 CFR Part 139.321(e)(1) "At least one supervisor with each fueling agent must have completed an aviation fuel training course in fire safety that is authorized by the Administrator. Such an individual must be trained prior to initial performance of duties, or enrolled in an authorized aviation fuel training course that will be completed within 90 days of initiating duties, and receive recurrent instruction at least every 24 consecutive calendar months." Approved **supervisory** training courses are listed in an addendum to AC 150/5230-4.

Organization:

Individual Fueling Agent Supervisor:

Supervisory Training Course Attended:

Current Training Course Completion Date (within last 24 months):

Note: Attach a copy of the supervisory training course certificate.

Previous Training Course Completion Date:

Hire Date Into Supervisory Position:

Hands-On Fire Extinguisher Training Date:

After attending an approved Supervisory Fuel Safety Training Course, the supervisor must obtain an initial briefing on "the fire code of the public body having jurisdiction over the airport" (if different from NFPA) from airport management, the local Fire Marshall, or the Authority Having Jurisdiction.

Date of Initial Local Fire Code Training Received:

Local Fire Code Training Provided By:

Supervisor Signature:

139.321(e)(2)

In accordance with 14 CFR Part 139.321(f), I certify that all other employees who fuel aircraft, accept fuel shipments, or otherwise handle fuel have received at least initial on-the-job training and recurrent instruction every 24 consecutive calendar months in fire safety from a supervisor trained in accordance with paragraph 139.321(e)(1).

Supervisor Name (Print):

Signature:

Date:

Date: