

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY**

**UST Division & Support Section**

**1110 West Washington Street, Phoenix, Arizona 85007**

(602) 771-7604 • ust-notification@azdeq.gov



**ADEQ USE ONLY**

Facility ID \_\_\_\_\_  
 Owner ID \_\_\_\_\_  
 Reviewer Initials \_\_\_\_\_

**NOTIFICATION FOR UNDERGROUND STORAGE TANKS FORM**

**1 TYPE OF NOTIFICATION**                      New Facility                      Amendment                      Permanent Closure

**2 UST OWNERSHIP INFORMATION**                      **3 UST OPERATOR INFORMATION**

Person or Business Name	Person or Business Name
Name of Contact Person	Name of Contact Person
Email Address	Email Address
Telephone & Fax Number	Telephone & Fax Number
Mailing Address	Mailing Address
City                      State                      Zip Code	City                      State                      Zip Code
Billing Address	Billing Address
City                      State                      Zip Code	City                      State                      Zip Code

**4 LOCATION OF UNDERGROUND STORAGE TANK (UST) FACILITY**

Facility Name	Parcel #	
Street Address		
City	County	Zip Code

If the facility does not have an address, describe the directions to the facility (from the nearest city, highways, mile markers, roads, etc)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**5 TYPE OF FACILITY**

- |                    |                  |                       |                 |
|--------------------|------------------|-----------------------|-----------------|
| GAS STATION        | AUTO REPAIR      | SCHOOL                | HOSPITAL        |
| AIRPORT            | HANGAR           | PETROLEUM DISTRIBUTOR | VACANT LAND     |
| FEDERAL GOVERNMENT | STATE GOVERNMENT | COUNTY GOVERNMENT     | CITY GOVERNMENT |
| INDUSTRY/FACTORY   | UTILITY          | RESIDENTIAL           | FARM            |
| OTHER (specify)    |                  |                       |                 |

**6 UST INSURANCE MECHANISM**

- |                                    |                                 |                                   |
|------------------------------------|---------------------------------|-----------------------------------|
| FINANCIAL TEST OF SELF-INSURANCE   | SURETY BOND                     | LOCAL GOVERNMENT BOND RATING TEST |
| GUARANTEE                          | TRUST FUND                      | LOCAL GOVERNMENT FINANCIAL TEST   |
| LETTER OF CREDIT                   | STANDBY TRUST                   | LOCAL GOVERNMENT FUND             |
| INSURANCE & RISK RETENTION GROUP ⇒ | Name of Insurance Company _____ |                                   |
|                                    | Policy Number _____             |                                   |

7	UNDERGROUND STORAGE TANK SYSTEM Description of UST System and Usage Information				
UST IDENTIFICATION NUMBER (ex: 1, 2A, 2B, 3, 4 etc.)					
a) Date of UST Installation					
b) Total Capacity (Gallons)					
c) Substance Currently or Last Stored					
Gasoline					
Aviation Gasoline					
Gasoline (Leaded)					
Gasoline (Unleaded)					
Gasoline (Mid-Grade)					
Gasoline (Premium/Super)					
Diesel					
Red Diesel					
Biodiesel (type _____)					
New Oil					
Used Oil					
Antifreeze/Ethylene Glycol					
Automatic Transmission Fluid					
Jet Fuel (type _____)					
Kerosene					
Unidentified/Unknown					
Other (please specify)					
Solvent					
Hazardous Substance					
Name of principal CERCLA substance					
Chemical abstract service (CAS) number					
8	UST – MATERIAL OF CONSTRUCTION				
Fiberglass (Singled-Walled)					
Fiberglass (Double-Walled)					
Asphalt-Coated or Bare Steel					
Composite (Steel Wrapped with Fiberglass)					
Unknown					
Other (describe):					
9	UST - CORROSION PROTECTION				
Cathodically Protected (Impressed Current)					
Date Installed					
Cathodically Protected (Sacrificial Anode)					
Date Installed					
Interior Lining					
Interior Lining Material					
Date Installed					
If UST was repaired, indicate date of repair					

10 PIPING – MATERIAL OF CONSTRUCTION										
UST IDENTIFICATION NUMBER (ex: 1, 2A, 2B, 3, 4 etc.)										
Fiberglass (Singled-Walled)										
Fiberglass (Double-Walled)										
Flexible Piping										
Bare or Galvanized Steel										
Partial Aboveground Piping										
No Piping										
Unknown										
Other										
11 PIPING - CORROSION PROTECTION										
Cathodically Protected (Impressed Current)										
Date Installed										
Cathodically Protected (Sacrificial Anode)										
Date Installed										
12 PIPING – APPLICATION TYPE										
Pressure										
Gravity Feed										
Suction – Check Valve at the Dispenser										
Suction – Check Valve on Top of the UST										
Manway to Submersible Pump Sealed/Bolted										
If Piping Replaced, Indicate Replacement Date										
If Piping Repaired, Indicate Repair Date										
13 SPILL AND OVERFILL PROTECTION										
Spill Device Installed										
Date Spill Device Installed										
Size of Spill Device										
Overfill Device Installed										
Date Overfill Device Installed										
Type of Overfill Device										
14 RELEASE DETECTION - USTS & PIPING										
	UST	Piping								
Manual Tank Gauging (tanks of 550 gallons or less)										
Tank Tightness Testing with Manual Gauging (tanks of 550 through 2000 gallons)										
Tank Tightness Testing with Inventory Controls										
Automatic Tank Gauging										
Vapor Monitoring										
Groundwater Monitoring										
Interstitial Monitoring										
SIR										
Automatic Line Leak Detector										
Line Tightness Testing										
Other Method Allowed by ADEQ										
EMERGENCY GENERATOR (Check box if UST system is connected to an emergency generator)										



## MAP AND DIAGRAM OF THE UST FACILITY

### Draw or Attach Site Map

The map should display UST locations, manways, vent lines, piping lines/runs, dispensers and any buildings or structures in the vicinity of the UST(s). Additionally, the map should display a reference to the major streets that surround the UST facility. If there are no major streets near the facility, please use the space below to provide directions to the UST facility from the nearest highway; please include the approximate distance from the nearest street, highway or any other landmark.

Directions to the facility (describe only if facility has no address or for rural facilities):


