

| | |
|--|---|
| NOTIFICATION OF STORAGE TANKS | WY FAC ID Number |
| Wyoming DEQ/SHWD, 122 West 25th Street, Cheyenne, WY 82002 | Owner Federal FEIN |
| TYPE OF NOTIFICATION | STATE USE ONLY |
| <input type="checkbox"/> New Facility or Initial Registration <input type="checkbox"/> Amended <input type="checkbox"/> Closure | DATE RECEIVED |
| INSTRUCTIONS | A. Date Entered into Computer |
| | B. Data Entry Clerk |
| | C. Owner was contacted to clarify responses, comments |
| Please type or print in ink all items except "signature" in section VIII. This form must be completed for each location containing underground storage tanks. If additional tanks are owned at this location, update this form and staple continuation sheets to the form as necessary. If there are any mistakes on the form as received, please make these corrections in red. | |

GENERAL INFORMATION

Notification is required by State Law for all underground tanks that have been used to store regulated substances since January 1, 1986, that are in the ground as of May 8, 1986, or that are brought into use after May 8, 1986; and for all above ground storage tanks that have been used to dispense gasoline or diesel to the public after July 1, 1994. This information is required by W.S. 35-11-1419 and 35-11-1420.

The primary purpose of this notification program is to locate and evaluate storage tanks that store or have stored petroleum or hazardous substances and are regulated by this program.

Who Must Notify?

W.S. 35-11-1419 as amended, requires that, unless exempted, either the owner or the operator of storage tanks that store regulated substances must notify Wyoming DEQ/SHWD of the existence of their tanks. Owner means:

- a) in the case of an underground storage tank in use on November 8, 1984, or brought into use after that day, any person who owns an underground storage tank used for the storage, use, or dispensing of regulated substances,
- b) in the case of any underground storage tank in use before November 8, 1984, but no longer in use on that date, any person who owned such tank immediately before the discontinuation of its use, and
- c) in the case of an above ground storage tank, owner means any person who owns an above ground storage tank meeting the definition found in W.S. 35-11-1415(a)(ix) or any facility that has undergone changes to facility information or tank system status.

For either above ground or underground storage tanks, operator means any person in control of or having responsibility for the daily operation of the tank.

Where to Notify?

Send completed notification forms to the address listed on top of the form.

What Tanks are Included?

Underground storage tank is defined as any one or a combination of tanks that (1) is used to contain an accumulation of "regulated substances", and (2) whose volume (including connected underground piping) is 10% or more beneath the ground. Underground tanks storing 1. Gasoline, used oil, or diesel fuel, petroleum, e.g., crude oil or any fraction thereof which is liquid at standard conditions of temperature and pressure (60 degrees Fahrenheit and 14.7 pounds per square inch absolute), and 2. This includes any substance defined as hazardous in section 101(14) of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 (CERCLA), with the exception of those substances regulated as hazardous waste under Subtitle C of RCRA.

Above ground storage tank is defined as any one or combination of containers, vessels and enclosures, including structures and appurtenances connected to them, constructed of non-earthen materials including support, the volume of which including the pipes connected thereto is more than 90% above the surface of the ground, which is used by a dealer to dispense gasoline or diesel fuels. Dealer means any person meeting the definition of W.S. 39-17-101(a) or 39-17-201(a)(iv)

When to Notify?

1. When a tank is installed, removed, or modified, the department must be verbally notified at least thirty days prior to tank installation, removal, or modification so that an inspection can be scheduled. When the department has issued a written approval of the installation or modification, this form should be submitted within thirty (30) days.
2. When a change in service occurs such as when tank is emptied and placed in Temporarily Out of Use status (TOU) or is brought back into service.
3. When a facility has changed operators or ownership that fact should be reported to the department on a change of ownership form. It is not necessary to file an amended notification form at that time.

| I. OWNER/OPERATOR OF TANK(S) | II. LOCATION OF TANKS |
|------------------------------|---------------------------|
| <input type="text"/> | <input type="text"/> |
| Owner Name | Facility Name |
| <input type="text"/> | <input type="text"/> |
| Address | Address |
| <input type="text"/> | <input type="text"/> |
| City, State Zip (County) | City, State, Zip (County) |
| <input type="text"/> | <input type="text"/> |
| Phone | Phone |
| <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> |
| | Latitude Longitude |

III. TYPE OF OWNER

- | | |
|---|--|
| <input type="checkbox"/> Federal Government | <input type="checkbox"/> Private (no retail) |
| <input type="checkbox"/> State Government | <input type="checkbox"/> Military |
| <input type="checkbox"/> Local Government | <input type="checkbox"/> Contractor |
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Farm |

IV. INDIAN LANDS

- Tanks are located on land within an Indian Reservation or on other trust lands. Tribe or Nation:
- Tanks are owned by native American nation or tribe.

V. TYPE OF FACILITY

DO YOU SELL PETROLEUM

- Yes No

- | | | | | |
|--|--|--|---|--|
| <input type="checkbox"/> Private Vehicle Fueling | <input type="checkbox"/> Private Aviation Fuel | <input type="checkbox"/> Commercial | <input type="checkbox"/> Fixed Base Operator | <input type="checkbox"/> Commercial Vehicle Fueling |
| <input type="checkbox"/> Petroleum Distributor | <input type="checkbox"/> Local Government | <input type="checkbox"/> Industrial | <input type="checkbox"/> Lubrication Facility | <input type="checkbox"/> Emergency Generator Fueling |
| <input type="checkbox"/> Air Taxi (Airline) | <input type="checkbox"/> State Government | <input type="checkbox"/> Contractor | <input type="checkbox"/> Residential | <input type="checkbox"/> Other |
| <input type="checkbox"/> Aircraft Owner | <input type="checkbox"/> Federal Non-Military | <input type="checkbox"/> Truck/Transporter | <input type="checkbox"/> Farm | _____ |
| <input type="checkbox"/> Auto Dealership | <input type="checkbox"/> Federal Military | <input type="checkbox"/> Utilities | <input type="checkbox"/> Railroad | Other _____ |

VI. CONTACT PERSON IN CHARGE OF TANKS

| | | | | |
|------|-----------|---------|-------|----------------|
| Name | Job Title | Address | Phone | E-Mail Address |
|------|-----------|---------|-------|----------------|

VII. FINANCIAL RESPONSIBILITY

- A. Are you eligible for the STATE FUND Program? Yes (current on ALL (fees) No
(If "No", documentation must be provided to the division for one of the mechanisms listed below under "C".)
- B. Has \$30,000 financial assurance for third party liability been obtained in accordance with W.S. 35-11-1428?
 Yes No Exempt (state or federal government)
- C. Which of the following forms of financial assurance are you using?

| | | | |
|-----------------------------|-------------------------------------|-----------------------------------|----------------------------|
| Self-Insured: Insurance: | Risk Retention Group: Guarantee: | Surety Bond: Letter of Credit: | Trust Fund: Not Listed: |
|-----------------------------|-------------------------------------|-----------------------------------|----------------------------|

VIII. CERTIFICATION (Read and sign after completing all sections)

Penalties

Any owner who knowingly fails to notify or submits false information shall be subject to a civil penalty not to exceed \$10,000 for each tank for which notification is not given or for which false information is submitted.

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based upon my inquiry of those individuals immediately responsible for obtaining the information. I believe that the submitted information is true, accurate and complete.

Name and official title of owner or owner's authorized representative (print)

Signature

Date Signed

IX. TANK INFORMATION: TANK DESCRIPTION AND MATERIAL

| Tank | Tank Status | | | Tank Material | | | | | | | | | | | | Tank Info | | | | AST Specifications | | | | | | | | | | | | | | | |
|------|----------------------|-------------------------|-------------------------|---------------|---------------|---------------|----------------|------------|-----------------------|----------|--------------------|-----------------------|--------------------------|-------------|------------------|----------------|--------|----------|-------------------|--------------------|--------------|--------------|---------------|-------------------|-----------------------|------------------------|------------------------|-------------------------|-----------------|-------------|--|--|--|--|--|
| | Date of Installation | Permanently out of use* | Temporarily out of use* | Steel | Cathode - SAS | Cathode - IPS | Asphalt Coated | Galvanized | (Composite (steel/F/G | Concrete | Epoxy coated steel | FG reinforced plastic | Polyethylene tank jacket | Double-Wall | Excavation liner | Lined interior | Other* | Repaired | Compartmentalized | Manifolded | Special Use | | Tank is Empty | Above ground tank | Earthen Dike w/ Liner | Earthen Dike w/o Liner | Concrete Dike w/ liner | Concrete Dike w/o liner | No Spill Diking | Spill Ponds | | | | | |
| | | | | | | | | | | | | | | | | | | | | | Heating Only | Emerg. Power | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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Additional Comments:

X. COMPARTMENT INFORMATION

| Tank | Compartment | Substances Stored | | | | | | | | | | Capacity | Other | | | | | | | | | | | | | | | | | | | | | | | | | | |
|------|-------------|---|--------|---------|----------|-------------|----------|--------|------------|----------|--|----------|------------------------------|---------------------------|------------------------|------------|-----------|----------------|------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| | | Currently or last stored in greatest quantity by volume | | | | | | | | | | | Estimated Capacity (gallons) | Overfill device installed | Spill device installed | Manifolded | | | | | | | | | | | | | | | | | | | | | | | |
| | | Gasoline | Diesel | Gasohol | Kerosene | Heating Oil | Used Oil | Other* | Hazardous* | Mixture* | Other, Hazardous, Mixture (please specify CERCLA name or CAS num if Hazardous) | | | | | | Butterfly | Overfill alarm | Ball check | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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Additional Comments:

XI. PIPING INFORMATION

| Tank | Compartment | Pipe | Pipe Material | | | | | Piping Constr. | | | | Pump Type | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|------|-------------|------|---------------|------------------|------------------------|--------|------------------|----------------|------|---------------------|---------|------------------------|------------------------|-------------|-----------------------|---|--------------|-------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| | | | Bare Steel | Galvanized Steel | F/G reinforced plastic | Copper | Flexible Plastic | Not Listed | None | Above Ground Piping | Unknown | Cathodically Prot. SAS | Cathodically Prot. ICS | Double-Wall | Secondary Containment | * Safe Suction: One valve below pump; piping sloped and below | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | Safe * | U.S. Suction | Pressurized | | | | | | | | | | | | | | | | | | | | | | | |
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Additional Comments:

XII. LEAK DETECTION FOR COMPARTMENTS

| Tank ID | Compartment | Compartment Leak Detection Method | | | | | | | | | | | Other (please specify) | |
|---------|-------------|-----------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|----------------|
| | | Manual tank gauging | Tank tightness testing | Inventory control (IC) | Automatic tank gauging | Vapor monitoring | Groundwater Monitor | SIR | Interstitial | Low throughput IC | CITLDS | Other method per DEQ | | Tracer Testing |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
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| | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

Additional Comments:

XIII. LEAK DETECTION FOR PIPING

| Pipe Description | Compartment | Pipe | Pipe Leak Detection Method | | | | | | | | | | Other (please specify) | | |
|------------------|-------------|------|----------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--|
| | | | Groundwater Monitor | Vapor Monitoring | Mechanical LLD | Electronic LLD | Sump sensor | Pressure Tested | Line tightness testing | SIR | Other method per DEQ | Not Listed | | Exempt | |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
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| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

**XIV. LICENSED STORAGE TANK INSTALLER'S OATH
(FOR NEW, REPAIRED, AND/OR MODIFIED UST SYSTEMS)**

I certify that the installation, repairs, and/or modifications, completed on the underground storage tank system were completed in accordance with Wyoming Water Quality Rules and Regulations, Chapter 17 and Wyoming Statute 35-11 Article 14.

Installer's Name DEQ Installer's License Number Company Signature Date