Department of Environmental Quality
Office of Environmental Services
Underground Storage Tank Division
P.O. Box 4313
Baton Rouge, LA 70821-4313
Phone: (225) 219-3440
Fax: (225) 219-3474

LOUISIANA

Form for Notification of Change to Stage 1/Stage 2 Vapor Recovery at Individual Facilities

Instructions: Use this form to update any information provided on the Stage1/Stage 2 Vapor Recovery Application that has changed.
Type or print carefully in ink (Illegible forms will be returned).
Mail or fax the completed form to the Stage 1/Stage 2 Program at the address above.

Applicant Information

Name _____

Mailing Address _____

City _____ State _____ Zip _____

Gasoline Dispensing Facility Information

Agency Interest No. _____ Facility ID No. _____

Full Legal Business Name _____

Facility Location _____

Contact Person _____ Telephone No. _____

Federal Tax ID # _____ Facility's Local Name _____

The information supplied on this form is true and correct to the best of my knowledge.

_____ _____
Signature of Authorized Officer Date

_____ _____
Print Name Title

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