

STATE OF LOUISIANA

NOTIFICATION OF INTENT TO PERFORM A CLOSURE OR CHANGE-IN-SERVICE TO AN UNDERGROUND STORAGE TANK SYSTEM

Please complete and return thirty (30) days prior to permanent UST system closure or change-in-service.

Return: LDEQ- UNDERGROUND STORAGE TANK & REMEDIATION DIVISION Appropriate Regional Office See attached mailing list or USTRD Submittal info @ www.deq.louisiana.gov Questions: See attached list	DEQ Facility Number DEQ AI Number
I. OWNERSHIP OF TANKS	II. LOCATION OF TANKS
IF OWNER'S ADDRESS CHANGED, PLEASE CHECK <input type="checkbox"/>	IF SAME AS SECTION I. PLEASE CHECK <input type="checkbox"/>
OWNER NAME (CORPORATION/INDIVIDUAL, ETC.) _____	FACILITY NAME OR COMPANY SITE IDENTIFIER _____
MAILING ADDRESS _____	STREET ADDRESS (P. O. BOX NOT ACCEPTABLE) _____
CITY _____ STATE _____ ZIP _____	CITY _____ STATE _____ ZIP _____
PARISH/COUNTY _____	PARISH _____
() _____	() _____
TELEPHONE (INCLUDE AREA CODE) _____	TELEPHONE (INCLUDE AREA CODE) _____
NAME OF CONTACT _____	CONTACT PERSON AT THIS LOCATION _____

III. TANK INFORMATION					
DATE SCHEDULED FOR CLOSURE/REMOVAL OR CHANGE-IN-SERVICE _____					
DEQ ASSIGNED TANK NUMBERS	SIZE OF TANK (GALLONS)	PRODUCT LAST STORED IN TANK	DEQ ASSIGNED TANK NUMBERS	SIZE OF TANK (GALLONS)	PRODUCT LAST STORED IN TANK
ATTACH CONTINUATION SHEETS IF NECESSARY					

IV. TANK CLOSURE INFORMATION	
A. If the tank(s) are to be closed in place, indicate cleaning method and the type of fill material to be used: _____	
B. Name of UST Certified Worker _____ Certificate No. _____	
C. Name of Contracting Company _____	
D. Name of laboratory to conduct sample analysis _____	
FORMS THAT INCLUDE "TO BE DETERMINED" OR "UNKNOWN" AS A RESPONSE WILL BE REJECTED	

V. CERTIFICATION		
I certify that the above information is correct to the best of my knowledge and that the appropriate UST Regional Office will be contacted seven days prior to performing the UST system closure or change-in-service. I agree if closure or change-in-service of the UST system does not begin within 90 days after DEQ's approval, that this form becomes invalid. I also agree to submit the following information within 60 days after closure/change-in-service of the UST system:		
(1) the 'UST Closure/Assessment Form' (UST-SURV-02); (2) two copies of a site drawing to include the information required by the "Underground Storage Tank Closure/Change-in-Service Assessment Guidelines"; (3) two copies of analytical results with chain-of-custody documents; and (4) two copies of all manifests, bills of lading or receipts for the disposition of tank(s), tank contents, soil and waters.		
PRINT OR TYPE OWNER'S NAME _____	OWNER'S SIGNATURE _____	DATE _____
FORMS THAT DO NOT INCLUDE THE OWNER'S SIGNATURE WILL BE REJECTED		

LDEQ RESPONSE - DO NOT WRITE BELOW THIS LINE		
<input type="checkbox"/> DEQ AI No. _____		
<input type="checkbox"/> Approved for the indicated activity.		
<input type="checkbox"/> Rejected for the following reason:		
<input type="checkbox"/> DEQ records indicate that the contractor you have selected is not a UST worker certified by DEQ for closure. You must select, from the enclosed list, a contractor that is a certified UST worker.		
<input type="checkbox"/> DEQ records indicate that the UST system has not been registered. You must complete the attached registration form and return it to this office IMMEDIATELY .		
<input type="checkbox"/> _____		
<input type="checkbox"/> The noted highlighted section(s) of this form must be completed in order for LDEQ to process.		
<input type="checkbox"/> This form has not been signed by the owner. Please resubmit with the required signature.		
Signature of LDEQ Representative _____	Telephone No. - _____	Date / / _____

NOTIFICATION OF INTENT TO PERFORM A CLOSURE
OR CHANGE-IN-SERVICE
TO AN UNDERGROUND STORAGE TANK SYSTEM

NOTICES WILL ONLY BE ACCEPTED ON THIS FORM.
YOUR UNDERGROUND STORAGE TANK **MUST** BE REGISTERED
PRIOR TO SUBMITTAL OF THIS FORM.

INSTRUCTIONS

THIRTY DAYS prior to permanent closure or change-in-service of a UST, all information required on this form must be completed. Forms that are incomplete may be rejected.

After completion, the UST owner is to forward the original, signed form to:

LDEQ-UNDERGROUND STORAGE TANK & REMEDIATION DIVISION
Appropriate Regional Office
See attached mailing list or USTRD
Submittal info@www.deq.louisiana.gov

The Underground Storage Tanks Division will distribute copies of the form as follows:

1. Original – USTR Division Main Office
2. Copy - DEQ Regional Office File
3. Copy - UST Owner (After DEQ Processing)

PROCEDURES TO BE FOLLOWED

The procedures which must be followed when performing a UST closure or change-in-service are provided in the "Underground Storage Tank Closure/Change-in-Service Guidance Document". To obtain a copy of this document, call the Underground Storage Tank & Remediation Division at (225) 219-3768, write to the address noted above, or visit our website at www.deq.louisiana.gov.

NOTICE

Chapter 13 of the UST Regulations requires that owners of USTs ensure that the contractor chosen to perform the UST closure/change-in-service employs an individual who holds a current Louisiana DEQ certificate for closure. The certified person must be present at the site and exercising responsible supervisory control during the closure/change-in-service process. A list of contractors who employ DEQ certified workers can be obtained from the Underground Storage Tank & Remediation Division, at (225) 219-3768, or on the web at www.deq.louisiana.gov.

**Notification Of Intent To Perform A Closure Or Change-In-Service
To An Underground Storage Tank System**

Please direct all correspondence regarding UST Closures or Change-in-Service to
the appropriate regional office:

Acadiana Regional Office	Parishes Served
111 New Center Drive Lafayette, LA 70508 phone: (337) 262-5584 fax: (337) 262-5593 email: _DEQ-USTCompliance-ARO@la.gov	Acadia, Evangeline, Iberia, Lafayette, St. Landry, St. Martin, St. Mary, Vermilion

Capital Regional Office	Parishes Served
ATTN: USTR Division - Surveillance Process P.O. Box 4312 Baton Rouge, LA 70821-4312 phone: (225) 219-3768 fax: (225) 325-8223 email: _DEQ-USTCompliance-CRO@la.gov	Ascension, Assumption, East Baton Rouge, East Feliciana, Iberville, Livingston, Pointe Coupee, St. Helena, St. James, St. Martin, Tangipahoa, West Baton Rouge, West Feliciana

Northeast Regional Offices	Parishes Served
1823 Hwy 546 West Monroe, LA 71292 phone: (318) 362-5439 fax: (318) 362-5448 email: _DEQ-USTCompliance-NERO@la.gov	Caldwell, East Carroll, Franklin, Jackson, Lincoln, Madison, Morehouse, Ouchita, Richland, Tensas, Union, West Carroll
Kisatchie Central Office (Located in the Northeast Regional Office Service Area) 2800 S. MacArthur Drive Alexandria, LA 71301 phone: (318) 487-5656 fax: (318) 487-5927 email: _DEQ-USTCompliance-NERO@la.gov	Avoyelles, Catahoula, Concordia, Grant, La Salle, Rapides, Winn

Northwest Regional Office	Parishes Served
1525 Fairfield Ave, Room 520 Shreveport, LA 71101-4388 phone: (318) 676-7476 fax: (318) 676-7573 email: _DEQ-USTCompliance-NWRO@la.gov	Bienville, Bossier, Caddo, Claiborne, De Soto, Natchitoches, Red River, Sabine, Webster

Southeast Regional Office	Parishes Served
New Orleans Office 201 Evans Road, Building 4, Suite 420 New Orleans, LA 70123-5230 phone: (504) 736-7701 fax: (504) 736-7702 email: _DEQ-USTCompliance-SERO@la.gov	Jefferson, Lafourche, Orleans, Plaquemines, St. Bernard, St. John the Baptist, St. Charles, St. Tammany, Terrebonne, Washington
Bayou Lafourche Office (Located in the Southeast Regional Office Service Area) 125 Barataria St. Lockport, LA 70374 phone: (985) 532-6206 fax: (985) 532-9945 email: _DEQ-USTCompliance-SERO@la.gov	Jefferson, Lafourche, Orleans, Plaquemines, St. Bernard, St. John the Baptist, St. Charles, St. Tammany, Terrebonne, Washington

Southwest Regional Office	Parishes Served
1301 Gadwall Street Lake Charles, LA 70615 phone: (337) 491-2667 fax: (337) 491-2682 email: _DEQ-USTCompliance-SWRO@la.gov	Allen, Beauregard, Calcasieu, Cameron, Jefferson Davis, Vernon