

ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
 Tank Programs Division
 Underground Storage Tank (UST) Program

ADEQ use only

DOCUMENT SUBMITTAL FORM

- use form as COVER SHEET when submitting the documents listed below.
- use only for the documents listed below.
- all requested information must be provided.

UST FACILITY INFORMATION:

Facility Name _____		Facility ID _____
Street Address _____		LUST Number(s) _____
City _____	Zip Code _____	County _____

PERSON RESPONSIBLE FOR SUBMITTING DOCUMENT:

Name _____

Street Address _____ City _____ Zip Code _____

Telephone (daytime) _____

PERSON CATEGORY
(check just one)

ADEQ ID #

- UST owner _____
- UST operator _____
- UST volunteer/
Property owner _____

RELEASE OR CORRECTIVE ACTION DOCUMENT: (check all that are attached)

[A.A.C. = Arizona Administrative Code]

DOCUMENT	A.A.C. CITATION	DOCUMENT	A.A.C. CITATION
<input type="checkbox"/> 14 day report (suspected release)	R18-12-251(E)	<input type="checkbox"/> Site characterization report (SCR)	R18-12-262(D)
<input type="checkbox"/> 90 day report (suspected release)	R18-12-251(F)	<input type="checkbox"/> Periodic site status report	R18-12-263(G)
<input type="checkbox"/> 14 day report (confirmed release)	R18-12-260(C)	<input type="checkbox"/> Tier 2 risk evaluation	R18-12-263.01(B)(2)
<input type="checkbox"/> 90 day report (confirmed release)	R18-12-261(D)	<input type="checkbox"/> Tier 3 risk evaluation	R18-12-263.01(B)(3)
<input type="checkbox"/> LUST site classification form	R18-12-261.01(E)	<input type="checkbox"/> Corrective action plan (CAP)	R18-12-263.02(B)
<input type="checkbox"/> Free Product Report	R18-12-261.02(C)	<input type="checkbox"/> Corrective action completion report w/LUST case closure request	R18-12-263.03(D)

CERTIFICATION STATEMENT OF UST OWNER, OPERATOR OR VOLUNTEER:

"I hereby certify, under penalty of law, that this submittal and all attachments are, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are penalties for submitting false information, including the possibility of a fine and imprisonment for knowing violations."

Signature of UST owner, operator or volunteer _____

Date _____

Name of UST owner, operator or volunteer (printed) _____

Title _____