UNDERGROUND STORAGE TANK (UST) REMOVAL/CLOSURE PERMIT APPLICATION



ENVIRONMENTAL HEALTH DIVISON 351 Tres Pinos Road, Suite C-1 Hollister CA 95023

Internal Use Only:

CERS: FA: Application Date: Office 831-636-4035 Fax 831-636-4037 This application is for ☐ Tank Removal ☐ Closure in place REMOVAL PER TANK /CLOSURE FEE: \$562.00 # of tanks: # of tanks: **FACILITY INFORMATION** BUSINESS NAME (same as FACILTIY NAME or DBA - Doing Business As) BUSINESS ADDRESS STATE CITY ZIP CODE NEAREST CROSS STREET **OWNER'S INFORMATION** NAME OF TANK OWNER/OPERATOR OWNER/OPERATOR'S PHONE OWNER/OPERATOR'S MAILING ADDRESS CITY STATE ZIP CODE III. **CONTRACTOR'S INFORMATION** CONTRACTOR'S NAME CONTRACTOR'S PHONE CONTRACTOR'S MAILING ADDRESS STATE ZIP CODE CALIFORNIA CONTRACTOR'S LICENSE NUMBER LICENSE TYPE NAME OF CONTRACTOR'S CONTACT PERSON CONTRACTOR'S EMAIL ADRESS ANTICIPATED TANK REMOVAL/CLOSURE DATE IV. SITE ASSESSMENT INFORMATION NAME OF SAMPLER SAMPLER'S PHONE SAMPLER'S MAILING ADDRESS STATE ZIP CODE V. LABORATORY INFORMATION NAME OF LABORATORY LABORATORY'S PHONE

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LABORATORY'S MAILING ADDRESS

CITY

ZIP CODE

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A closure report shall be submitted to this office within thirty (30) days of tank(s) removal.	Provide a page if nee	drawing in the space a	above of tanks, pir	oing, lengths, dimension	ıs, pro	posed sampling loca	ations des	ignated by \otimes , and	North arrow (use add	ditional
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THIS FORM HAS BEEN COMPLETED UNDER PENALTY OF PERJURY AND TO THE BEST OF MY KNOWLEDGE IS TRUE AND CORRECT. I HAVE RECEIVED, UNDERSTAND, AND WILL COMPLY WITH THE ABOVE CONDITIONS OF THIS PERMIT AND ANY OTHER STATE, LOCAL AND FEDERAL REGULATIONS.

APPLICANT SIGNATURE						
Certification – I certify that the information provided herein is true and accurate to the best of my knowledge.						
SIGNATURE OF APPLICANT	DATE	PHONE				
		()				
NAME OF APPLICANT (print)	TITLE OF APPLICANT					
OFFICIAL USE ONLY						
APPLICATION RECEIVED BY	FEE ALLOCATION					
	☐ CS02 PERMANENT REMOVAL					
INSPECTOR NAME (print)	CONTACT PHONE					
	()					
ISSUE DATE	EXPIRATION DATE					
APPROVED BY						

THIS APPLICATION BECOMES A PERMIT WHEN APPROVED

MAINTAIN ON SITE AT ALL TIMES

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