

# Appendix II to Part 280

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| <b>Notification of Ownership Change for Underground Storage Tanks</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| Implementing Agency Name And Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>IMPLEMENTING AGENCY USE ONLY</b>                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
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| <b>INSTRUCTIONS AND GENERAL INFORMATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | OWNER WAS CONTACTED TO CLARIFY RESPONSES, COMMENTS:                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <p>Please <b>type or print in ink</b>. Also, be sure you have signatures in ink.</p> <p>The primary purpose of this notification form is to inform implementing agencies of ownership changes for underground storage tank (UST) systems that store or have stored petroleum or hazardous substances.</p> <p><b>Federal regulation requires UST owners to notify the implementing agency of any ownership change for USTs storing regulated substances after May 8, 1986.</b></p> <p><b>Who Must Notify?</b> 40 CFR part 280, as amended, requires owners of USTs that store regulated substances (unless exempted) to notify implementing agencies of any ownership changes. Owner is defined as:</p> <ul style="list-style-type: none"> <li>In the case of an UST in use on November 8, 1984, or brought into use after that date, any person who owns an UST used for storage, use, or dispensing of regulated substances; or</li> <li>In the case of an UST in use before November 8, 1984, but no longer in use on that date, any person who owned the UST immediately before its discontinuation.</li> </ul> <p><b>What USTs Are Included?</b> An UST system is defined as anyone or combination of tanks that is used to contain an accumulation of regulated substances, and whose volume (including connected underground piping) is 10 percent or more beneath the ground. Regulated USTs store petroleum or hazardous substances (see <b>What Substances Are Covered</b> to the right). This includes UST systems with field-constructed tanks and airport hydrant fuel distribution systems.</p> <p><b>When And Who To Notify?</b> Any owner or operator who assumes ownership of a regulated UST system must submit this notification form to the implementing agency within 30 days of assuming such ownership.</p>                                                                                                                                                                                                                                                                                                                                                      |                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <p><b>What Tanks Are Excluded From Notification (see § 280.10 and § 280.12)?</b></p> <ul style="list-style-type: none"> <li>Tanks removed from the ground before May 8, 1986;</li> <li>Farm or residential tanks of 1,100 gallons or less capacity storing motor fuel for noncommercial purposes;</li> <li>Tanks storing heating oil for use on the premises where stored;</li> <li>Septic tanks;</li> <li>Certain pipeline facilities regulated under chapters 601 and 603 of Title 49;</li> <li>Surface impoundments, pits, ponds, or lagoons;</li> <li>Storm water or wastewater collection systems;</li> <li>Flow-through process tanks;</li> <li>Liquid traps or associated gathering lines directly related to oil or gas production and gathering operations;</li> <li>Tanks on or above the floor of underground areas, such as basements or tunnels;</li> <li>Tanks with a capacity of 110 gallons or less;</li> <li>Wastewater treatment tank systems;</li> <li>UST systems containing radioactive material that are regulated under the Atomic Energy Act of 1954;</li> <li>UST systems that are part of an emergency generator system at nuclear power generation facilities regulated by the Nuclear Regulatory Commission under 10 CFR part 50.</li> </ul> <p><b>What Substances Are Covered?</b> The notification requirements apply to USTs containing petroleum or certain hazardous substances. Petroleum includes gasoline, used oil, diesel fuel, 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). Hazardous substances are those found in Section 101 (14) of the Comprehensive Environmental Response, Compensation and Liability Act of 1980, with the exception of those substances regulated as hazardous waste under Subtitle C of the Resource Conservation and Recovery Act.</p> <p><b>Penalties:</b> Any owner who knowingly fails to notify or submits false information shall be subject to a civil penalty not to exceed \$16,000 for each tank for which notification is not given or for which false information is given.</p> |                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <b>OWNERSHIP OF USTs</b><br><b>Corporation, Individual, Public Agency, Or Other Entity</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                 | <b>FACILITY NAME AND LOCATION OF USTs</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| Current Owner Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Previous Owner Name                                                             | Facility Name<br><br><input type="checkbox"/> Check here if name changed after ownership                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Current Owner Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Previous Owner Address                                                          | <input type="checkbox"/> Check this box if the physical address of the USTs is the same as the current owner address. If address is different, enter address below:<br><br>If required by implementing agency, give the geographic location of USTs either in decimal degrees, or degrees, minutes, and seconds. Example: Latitude: 36.12348 (or 36° 7' 24.4"), Longitude: -106.549876 (or -106° 32' 59.6")<br><br><div style="display: flex; justify-content: space-between;"> <span>Latitude _____</span> <span>Longitude _____</span> </div> |
| Current Owner Phone                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Previous Owner Phone                                                            | Date Of Ownership Change                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| <div style="display: flex; justify-content: space-between;"> <span><b>Signature Of Current Owner:</b> _____</span> <span><b>Date:</b> _____</span> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <p><b>Paperwork Reduction Act Notice</b></p> <p>The public reporting and recordkeeping burden for this collection of information is estimated to average 30 minutes per response. Responses to this collection of information are mandatory (40 CFR 280.22). An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. This collection of information is approved by OMB under the Paperwork Reduction Act, 44 U.S.C. 3501 et seq. (OMB Control No. 2050-0068). Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including through the use of automated collection techniques to the Director, Collection Strategies Division, U.S. Environmental Protection Agency (2822T), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed form to this address.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

