



Underground Storage Tank (UST) Release 24 Hour Notification/Release Notification

Arizona Revised Statutes §49-1004

Note: If you are an UST owner or operator, you must also submit the *Document Submittal Form* (Form UST-264) with this document, which is available on our website <http://www.azdeq.gov/>

1 TYPE OF NOTIFICATION	
<input type="checkbox"/> Suspected Release (You must also complete Attachment A) pursuant to Arizona Administrative Code (A.A.C.) R18-12-251(A) <input type="checkbox"/> Confirmed Release (You must also complete Attachment B) pursuant to A.A.C. R18-12-260(A)	
2 INDIVIDUAL NOTIFYING THE DEPARTMENT	
Date:	Name:
Telephone:	Email:
3 FACILITY INFORMATION	
ADEQ Facility ID Number: 0-0	Name:
Street Address:	
City:	Zip Code: County:
4 UST OWNER INFORMATION	5 UST OPERATOR INFORMATION (if different than UST Owner)
<i>Note: UST owner and operator information by facility may be looked up in the ADEQ UST Database on the ADEQ website</i>	
<input type="checkbox"/> Same as UST Owner	<input type="checkbox"/> Same as UST Operator
Person or Business Name (as listed on legal documents):	Person or Business Name (as listed on legal documents):
Name of Contact Person:	Name of Contact Person:
Role:	Role:
Mailing Address:	Mailing Address:
City: State: Zip Code:	City: State: Zip Code:
Telephone: Fax:	Telephone: Fax:
Email Address:	Email Address:
6 PROPERTY OWNER	
<input type="checkbox"/> Same as UST Owner <input type="checkbox"/> Same as UST Operator	
Person or Business Name (as listed on legal documents):	
Name of Contact Person:	Role:
Mailing Address:	
City: State: Zip Code:	
Telephone: Fax: Email Address:	
7 STATUS OF THE UST SYSTEM ASSOCIATED WITH THE SUSPECTED OR CONFIRMED RELEASE	
<input type="checkbox"/> Active <input type="checkbox"/> Temporarily closed (Closure Date: _____) <input type="checkbox"/> Permanently closed (Closure Date: _____)	

8**ADDITIONAL INFORMATION**

A) How was the suspected or confirmed release discovered? (check all that apply and attach supporting documentation)

- | | |
|---|--|
| <input type="checkbox"/> Inventory discrepancies | <input type="checkbox"/> ATG results (<input type="checkbox"/> 0.2 GPH <input type="checkbox"/> CSLD) |
| <input type="checkbox"/> SIR results | <input type="checkbox"/> Tightness test (<input type="checkbox"/> Tank <input type="checkbox"/> Line <input type="checkbox"/> Other: _____) |
| <input type="checkbox"/> Product in UST pump sump | <input type="checkbox"/> Product in under-dispenser containment (UDC) |
| <input type="checkbox"/> Citizen complaint | <input type="checkbox"/> Product in interstitial space (<input type="checkbox"/> Tank <input type="checkbox"/> Line) |
| <input type="checkbox"/> Vehicle accident | <input type="checkbox"/> Soil vapor survey for site with existing LUST |
| <input type="checkbox"/> Odors present | <input type="checkbox"/> Local groundwater contamination |
| <input type="checkbox"/> Stained soil | <input type="checkbox"/> Analytical results from permanent closure of UST(s) |
| <input type="checkbox"/> Free product discovered | <input type="checkbox"/> Analytical results from environmental due diligence |
| <input type="checkbox"/> Other: _____ | |

B) Identify product suspected or confirmed to be released (check all that apply):

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Unleaded gasoline | <input type="checkbox"/> Aviation fuel | <input type="checkbox"/> Used oil | <input type="checkbox"/> Jet fuel (specify: _____) |
| <input type="checkbox"/> Mid-grade unleaded gasoline | <input type="checkbox"/> Diesel | <input type="checkbox"/> Biodiesel (B____) | <input type="checkbox"/> Other (specify: _____) |
| <input type="checkbox"/> Premium unleaded gasoline | <input type="checkbox"/> New oil | <input type="checkbox"/> Ethanol flex fuel (E____) | |

C) Attach a site map indicating the UST(s) involved

D) Describe any other pertinent information related to the suspected release or confirmed release:

9**VENDOR INFORMATION**

A) Have you hired a UST service provider? No Yes

If "Yes", provide:

Company name of UST service provider: _____

First and last name of UST service provider: _____

ADEQ certification number: _____

B) Have you hired a professional registrant (environmental consultant)? No Yes

If "Yes", provide:

Company name of professional registrant: _____

First and last name of professional registrant: _____

Arizona professional registrant number: _____

ATTACHMENT A
SUSPECTED RELEASE INFORMATION

Suspected release discovery date:

1 REQUEST FOR ADEQ ASSISTANCE

- A) Would you like an ADEQ UST Inspector to conduct a site visit to assist you with the suspected release?
 Yes No N/A
- B) Would you like a facility meeting or teleconference with ADEQ to discuss the suspected release?
 Yes (please submit the *External Facility Meeting Request Form* available on our website) No
- C) Would you like to discuss options for ADEQ State Lead assistance with suspected release confirmation sampling?
 Yes (please contact State Lead Program Manager, Mike Latin, at (602) 771-4308) No

2 INVESTIGATIVE ACTIONS SINCE SUSPECTED RELEASE TO DATE (CHECK ALL THAT APPLY)

- Line tightness test Tank tightness test Site check Other: _____

Describe in detail:

3 CONTAINMENT ACTIONS SINCE SUSPECTED RELEASE TO DATE (CHECK ALL THAT APPLY)

- Emptied fuel from UST(s) Shut down component (Tank Line Dispenser)
- Replaced leaking component(s)¹ Repaired leaking component(s)¹ Other: _____

Describe in detail:

4	ANTICIPATED ACTIONS TO ADDRESS SUSPECTED RELEASE (CHECK ALL THAT APPLY)
<input type="checkbox"/> Replace leaking component(s) <input type="checkbox"/> UST equipment testing Describe in detail:	<input type="checkbox"/> Repair leaking component(s) <input type="checkbox"/> Other: _____

5	FINANCIAL RESPONSIBILITY (FR) INFORMATION
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A) Name of FR provider: _____
B) Have you notified your FR provider of the suspected release? ² <input type="checkbox"/> Yes <input type="checkbox"/> No

6	ATTACH THE FOLLOWING DOCUMENTATION (IF AVAILABLE)
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<input type="checkbox"/> Last 12 months of leak detection records for tanks, piping, and dispenser	<input type="checkbox"/> Last line leak detector test
<input type="checkbox"/> Last 12 months of inventory records	<input type="checkbox"/> Last overfill protection test
<input type="checkbox"/> Last tank, piping, and UDC tightness test	<input type="checkbox"/> Last impact valve test
<input type="checkbox"/> Last leak detection equipment calibration/maintenance test	<input type="checkbox"/> Last spill bucket test
<input type="checkbox"/> Last cathodic protection test (if applicable)	<input type="checkbox"/> Police report (if applicable)

¹If any UST components have been repaired or replaced, attach the repair/replacement documentation if not previously sent in accordance with A.A.C. R18-12-234(C).

²Some UST insurance providers require insureds to notify them of a suspected release. Please ensure that you review the notification requirements in your policy.

ATTACHMENT B
CONFIRMED RELEASE INFORMATION

- A) Release confirmation date:
- B) Did the confirmed release originate from a suspected release? Yes No
If "Yes", the suspected release discovery date:
- C) Estimated gallons of fuel released (if known): _____

1 REQUEST FOR ADEQ ASSISTANCE

- A) Would you like a facility meeting or teleconference with ADEQ to discuss the confirmed release?
 Yes (please submit the *External Facility Meeting Request Form* available on our website) No
- B) Would you like to discuss options for ADEQ State Lead assistance with the cleanup of a confirmed release?
 Yes (please contact State Lead Program Manager, Mike Latin, at (602) 771-4308) No

2 INVESTIGATIVE ACTIONS SINCE RELEASE CONFIRMATION TO DATE (CHECK ALL THAT APPLY)

- Soil samples collected Groundwater samples collected
 Site check (in response to related suspected release) Other: _____

Describe in detail:

3 CONTAINMENT ACTIONS SINCE RELEASE CONFIRMATION TO DATE (CHECK ALL THAT APPLY)

- Repaired leaking component(s)¹ Replaced leaking component(s)¹

Describe in detail:

**4 INITIAL ABATEMENT/CORRECTIVE ACTIONS SINCE RELEASE CONFIRMATION TO DATE
(CHECK ALL THAT APPLY)**

- Emptied fuel from UST(s) Initiated early cleanup²
 Investigated for presence of free product and initiated free product removal

Describe in detail:

5 FINANCIAL RESPONSIBILITY (FR) INFORMATION

- A) Name of FR provider: _____
- B) Have you notified your FR provider of the confirmed release? Yes No
- C) Have you filed a claim to your FR provider for the confirmed release? Yes No

¹If any UST components have been repaired or replaced, attach the repair/replacement documentation if not previously sent in accordance with A.A.C. R18-12-234(C).

²Initiating early cleanup as soon as possible may help to prevent the spread of contamination and decrease the time and costs required to complete cleanup activities and expedite closure. Please refer to the [Early Cleanup Technology Deployment Guidance](http://www.azdeq.gov/) for more information, which is available on our website <http://www.azdeq.gov/>.

Electronic Submittal Instructions

Although ADEQ is not set up to accept only electronic submittals, **we highly encourage you to submit your form electronically as well. Electronic submittals may allow for more timely review of your form.**

Note: *If you choose to submit your submittal electronically, the submittal date of the form will be the date the department receives the hard copy, not the electronic copy. The electronic submittal will not take the place of a hard copy submittal.*

To submit the form electronically,

1) Click the “Save” button below and then name the application using the following specifications. The file name for should start with the date (yyyy.mm.dd), facility number, and form name

Example: 2016.09.20.FAC0-001234.24HrNotification

2) Click the “Submit” button located below.

3) **If you would like to submit additional information, please include it as a separate attachment in the submittal email or insert the pages at the end of this PDF file. Please do not scan this form and attach it to the email.** Data obtained from the submitted forms will allow ADEQ to better assist Arizona UST owners and operators with UST operations and leak prevention. In addition, scanning the form (and any additional attachments) may make the file too large to send by email.