

UST-LUST MEETING REQUEST FORM

****DO NOT USE THIS FORM TO REQUEST AN APPEAL****

If you would like to request a meeting with ADEQ UST-LUST staff, please provide the following information:

Today's Date: _____

Your Name: _____ Phone Number: _____

Email Address: _____

Your Role (check all that apply): owner operator property owner

Signature of Individual requesting meeting: _____
****Responsible Party's (RP) or Individual employed in RP's Company/Corporation and/or RP's Legal Representation****

Role relative to UST Owner, Operator or Property Owner, RP: _____

ADEQ-assigned underground storage tank (UST) facility identification number(s): 0-0 _____

ADEQ-assigned leaking UST (LUST) number(s): _____

Do you plan on having an attorney attend? no yes *If yes, please provide attorney's name, phone number and email address: _____

Do you plan on having an environmental professional attend? no yes *If yes, please provide professional's name, phone number and email address: _____

Reason for meeting request

(Identify all that are applicable -if additional space is needed, please attach on another page):

UST (New)

New UST owner/operator – I would like to discuss regulatory requirements

New UST owner/operator – I would like to discuss financial responsibility requirements

New UST owner/operator – I would like to discuss (describe):

(Ongoing)

Operating UST system – I would like to discuss regulatory requirements *if there are specific requirements you would like to discuss, please identify them:

Operating UST system – I believe my system may be leaking and would like to discuss

Operating UST system – I would like to discuss change in source

Operating UST system – I would like to discuss how to bring my UST system back into service

Operating UST system – I would like to discuss how to temporarily or permanently close my UST system

Operating UST system – I would like to discuss financial responsibility requirements

LUST

- LUST Release – I would like to discuss regulatory requirements and current conceptual site model (CSM): Attach current CSM data information if available
 - LUST Release – I would like to discuss a release and clean up options for my site
 - LUST Release – I would like to learn more about the State Lead Program
 - LUST Release – I would like to discuss the Preapproval Program
- To prepare for this meeting, refer to ADEQ's Webpage (<http://www.azdeq.gov/node/1397>) for eligibility requirements
- LUST Release – I would like to discuss closure options Tier 1 Risk-Based Closure
 - LUST Release – I would like to discuss (describe):

TSIP

- I would like assistance with the application process (check the type of application).
- UST System Upgrade
 - Baseline Assessment
 - UST Removal
 - Suspected Release Confirmation
- To prepare for this meeting, refer to ADEQ's Webpage (<http://www.azdeq.gov/node/4307>) for application steps and meeting topics.

Program staff you would like available:

- Inspections and Compliance
- Financial Responsibility
- Enforcement Program
- State Lead Program (Noncorrective Actions)
- Corrective Actions
- State Lead Program (Corrective Actions)
- Preapproval Eligibility
- Tank Site Improvement (TSI) Program

Unless otherwise agreed upon, meetings will be held at: 1110 W. Washington St., Phoenix, AZ in Conference Room 1010B. We will send you a time and date.

- Requesting Teleconference

Please list attendees below:

Name	Firm/Role	Email	If Attending Telephonically (please provide phone number)

****It is the requestor's responsibility to inform all attendees of the meeting date and time****

For Tank Site Improvement (TSI) Program only, email this form to usttsi@azdeq.gov.
 For Preapproval Eligibility Consultations only, email this form to ustpreapproval@azdeq.gov.
 For Facility Meetings, email or fax this form to USTCAS@azdeq.gov , fax number (602) 771-4272.