

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)

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|---|
| <input type="checkbox"/> New UST owner/operator – I would like to discuss regulatory requirements <input type="checkbox"/> New UST owner/operator – I would like to discuss financial responsibility requirements <input type="checkbox"/> New UST owner/operator – I would like to discuss (describe): |
|---|

(Ongoing)

| |
|--|
| <input type="checkbox"/> Operating UST system – I would like to discuss regulatory requirements *if there are specific requirements you would like to discuss, please identify them: |
| <input type="checkbox"/> Operating UST system – I believe my system may be leaking and would like to discuss <input type="checkbox"/> Operating UST system – I would like to discuss change in source <input type="checkbox"/> Operating UST system – I would like to discuss how to bring my UST system back into service <input type="checkbox"/> Operating UST system – I would like to discuss how to temporarily or permanently close my UST system <input type="checkbox"/> 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):

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

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

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.