

****THIS FORM CANNOT BE USED TO REQUEST AN APPEAL****

If you would like to request a meeting with ADEQ UST-Leaking UST 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: _____
Signed by either the Responsible Party (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)
<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



UST and Leaking UST Meeting Request Form (cont.)

Leaking Underground Storage Tank

- Leaking UST Release – I would like to discuss regulatory requirements and current Informational Report with eTables: Attach current eTable data information, if available
 - Leaking UST Release – I would like to discuss a release and clean up options for my site
 - Leaking UST Release – I would like to learn more about the State Lead Program
 - Leaking UST Release – I would like to discuss the Preapproval Program
- To prepare for this meeting, visit azdeq.gov/ust/preapproval for program eligibility requirements
- Leaking UST Release – I would like to discuss closure options Tier 1 Risk-Based Closure
 - Leaking UST Release – I would like to discuss (describe):

Noncorrective Action (NCA)

I would like assistance with the application process for:

- UST Removal

To prepare for this meeting, visit azdeq.gov/node/1473 for application steps and meeting topics.

If you need additional information, contact the UST Outreach Coordinator at 602-771-2000 or usttsi@azdeq.gov

Tank Site Improvement Program (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, visit azdeq.gov/TSIPProgram for application steps and meeting topics.

If you need additional information, contact the UST Outreach Coordinator at 602-771-2000 or usttsi@azdeq.gov

Meeting Location: Unless otherwise agreed upon, this meetings will be held at:

1110 W. Washington St., Phoenix, AZ in Conference Room 1010B. We will send you a time and date.

- For this meeting, I need to request a teleconference

Please list attendees below:

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

Please Note: It is the requestor's responsibility to inform all attendees of date and time of this meeting.

To Submit Electronically: Email this completed form to ustadmin@azdeq.gov

Note: You may need to copy and paste the email address into the send field of your email. Please remember to CC your ADEQ Case Manager (CM) when submitting this and all requests electronically.

To submit by fax: send to 602-771-4272