



South Carolina Department of Health and Environmental Control

Notification for Underground Storage Tanks No Longer in Operation

1. Name and address of the facility	2. Business mailing address of facility, if different from location address	3. Owner of tank (name, business address, and phone number)	4. Contact person for the facility (Name and phone number)
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5. Type of owner (Mark "X") <input type="checkbox"/> Non-Federal <input type="checkbox"/> Federal (Give GSA #)	6. For State Use Only
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Complete the following section(s) to the best of your knowledge using the examples provided as guidance. Check appropriate boxes and fill in blanks where applicable.

7. Tanks taken out of use after January 1, 1974 but still in the ground.

a. Tank No.	b. Date of last use		c. Age when last used (years)	d. Total Capacity (gallons)	e. Material of construction			f. Internal Protection		g. External Protection				h. Substance left stored, if any					Estimated Quantity (gallons)			
	Month	Year			Steel	FRP	Other (specify)	Lined	Unlined	Coated	Wrapped	Cathodic Protection	Other (specify)	Hazardous substance name and/or CAS#	Gasoline	Diesel	Kerosene	Other (specify)				
Example	6	75	10 years	8000	TP				X				TP					X				120
1																						
2																						
3																						
4																						
5																						
6																						

8. Certification - I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

a. Name and Official Title of owner or owner's authorized representative (Type or print) _____

b. Signature _____ c. Date signed _____

Item by Item Instructions:

Type or print in ink all items except 8b "Signature". Complete the following sections to the best of your knowledge using the examples provided as guidance. Enter "unknown" whenever you do not know the answer. If additional space is needed to complete the form, attachments detailing the required information will be accepted.

- 1) Name and Address of the Facility – Enter the name and the address of the facility where the tank(s) are located. The address should include the name of the nearest cross street. The address should also include the name of the county in which the facility is located.
- 2) Business Mailing Address – Enter the name and mailing address of the facility if different from the location address.
- 3) Owner of Tank – enter the name, address, and telephone number of the tank owner at the time the tank was taken out of operation.
- 4) Contact Person – Enter the name and business telephone number of the person responsible for operation of the tank(s).
- 5) Type of Owner – Mark "X" in the appropriate box to indicate whether the facility is owned by a Federal Agency. An installation is federally owned if the owner is the Federal Government, even if it is operated by a private contractor. Enter the GSA identification number in the space provided if the facility is Federally owned.
- 6) For State Use Only – Do not write in this block.
- 7) Tanks Taken Out of Operation after January 1, 1974 but still in the ground
 - (a) Tank Number – self explanatory
 - (b) Date of Last Use – Enter the date (by month and year) when the tank was taken out of operation.
 - (c) Age When Last Used – Indicate the age of the tank when it was taken out of service.
 - (d) Estimated Total Capacity – enter the estimated capacity of the tank in gallons.
 - (e) Material of Construction – Mark "T" in the appropriate box to indicate the material of construction of the tank. Mark "P" in the appropriate box to indicate the material of construction of the piping. If both the tank and piping are constructed of the same material, then mark "TP" in the appropriate box. If the tank or piping is neither constructed of steel nor fiberglass reinforced plastic, then specify the material of construction in the "other" box.
 - (f) Internal Protection – Mark "X" in the appropriate box to indicate whether the tank is internally protected with a lining or whether it is unlined.
 - (g) External Protection – Mark "T" in the appropriate box to indicate whether the tank is equipped with cathodic protection or if the tank is coated or wrapped. Mark "P" in the appropriate box to indicate whether the piping is equipped with cathodic protection or if the piping is coated or wrapped. If both the tank and piping have similar external protection, mark "TP" in the appropriate box. Enter other types of external protection, such as secondary containment (e.g. double wall or vault) in the "other" box.
 - (h) Substance Type – Indicate which type of "regulated substance" has been left stored, if any, in the tank after it was taken out of operation.

If the tank is storing a regulated substance, enter the name of the chemical. Also, if known, provide the Chemical Abstracts Service (CAS) registry number. When a mixture of several regulated substances is stored in one tank, enter the name of the substance of greatest quantity. If the tank is storing petroleum products, mark "X" in the appropriate box to indicate the type of petroleum product that is stored. If your tank is storing petroleum products other than gasoline, diesel, or kerosene, then enter the name of the product in the "other" box.

Enter the estimated quantity of product in the tank.

- 8) Certification – This certification must be signed by the owner or an authorized representative of the facility. An authorized representative is a person responsible for the overall operation of the facility, as for example, a plant manager or superintendent, or a person of equivalent responsibility.

Filing – After completing this form, send to: SCDHEC/UST Program, 2600 Bull St, Columbia, SC 29201

If you have questions, please call 803-896-6240.

It is also recommended that the owner retain a copy of the completed form.