



GENERAL PERMIT REGISTRATION FORM

To Install and Operate USTs

Tank Owner* as registered with the Secretary of State,
 Corporations Division

Mailing Address (*Please Print*)

Name of Official (*Please Print*)

City, State and Zip Code

Signature of Official

Date

Area Code and Telephone Number

I will install and operate the USTs described on the Notification and Description of Underground Storage Tank Systems pages in accordance with the conditions and requirements of the applicable general permits.

Permittee* as registered with the Secretary of State,
 Corporations Division

Mailing Address (*Please Print*)

Name of Official (*Please Print*)

City, State and Zip Code

Signature of Official

Date

Area Code and Telephone Number

I will install and operate the USTs described on the Notification and Description of Underground Storage Tank Systems pages in accordance with the conditions and requirements of the applicable general permits.

Property Owner is name that appears on the County deed
 record for this property.

Mailing Address (*Please Print*)

Name of Official (*Please Print*)

City, State and Zip Code

Signature of Official

Date

Area Code and Telephone Number

* If this facility or tanks are owned by a person, or operated by a permittee, that is a business registered with the Secretary of State, Corporations Division, please use that legal business name for purposes of registering these USTs with the Department.

If you want annual tank fee invoice mailed to a party other than the permittee listed above, please provide the invoice name and address below. Otherwise leave this box blank.

Invoicee Name (*Please Print*)

City, State and Zip Code

Mailing Address (*Please Print*)

Area Code and Telephone Number