



Affirmative Statement of UST Compatibility with Hazardous Substance

Title 23, California Code of Regulations, Section 2631

County of San Diego, Department of Environmental Health

P.O. Box 129286, San Diego, CA 92112-9261 (858) 505-6880

UPF Permit # _____

Facility Name: _____ Tank Owner: _____

Facility Address: _____ Tank Owner Address: _____

Hazardous Substance (name, % and quantity): _____ Contact Name & Phone: _____

Component	Manufacturer	Model	Capacity	Contents (include % of hazardous substance)	Submitted by SWRCB? (check box if YES)¹
Tank ID:					<input type="checkbox"/>
Sumps				<i>INTENTIONALLY LEFT BLANK.</i>	<input type="checkbox"/>
UDCs					<input type="checkbox"/>
Piping					<input type="checkbox"/>
Flex piping					<input type="checkbox"/>
Spill buckets					<input type="checkbox"/>
Other _____					<input type="checkbox"/>
Other _____					<input type="checkbox"/>
Tank ID:					
Sumps				<i>INTENTIONALLY LEFT BLANK.</i>	<input type="checkbox"/>
UDCs					<input type="checkbox"/>
Piping					<input type="checkbox"/>
Flex piping					<input type="checkbox"/>
Spill buckets					<input type="checkbox"/>
Other _____					<input type="checkbox"/>
Other _____					<input type="checkbox"/>
Tank ID:					

¹ By checking "YES", you are indicating that the manufacturer's affirmative statement(s) of compatibility is/are currently listed on the SWRCB website.

I declare, to the best of my knowledge and belief, that the information listed herein is true, correct, and complete.

Certifier's Printed Name

Certifier's Title

Certifier's Signature

Date Signed