



**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: \_\_\_\_\_

<b>Component</b>	<b>Manufacturer</b>	<b>Model</b>	<b>Capacity</b>	<b>Contents (include % of hazardous substance)</b>	<b>Submitted by SWRCB? (check box if YES)<sup>1</sup></b>
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:					

<sup>1</sup> 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