



Affirmative Statement of UST Compatibility with Hazardous Substance

Title 23, California Code of Regulations, Section 2631

County of San Diego, Department of Environmental Health & Quality

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