



**OREGON DEPARTMENT OF ENVIRONMENTAL QUALITY
Underground Storage Tank Program**

UST SYSTEM MODIFICATION - 30-DAY NOTICE

1. FACILITY (Location of Tanks)	2. PERMITTEE
Name: _____	Name: _____
Address: _____ _____	Address: _____ _____
Phone: _____	Phone: _____
DEQ Facility ID Number: _____	
Work To Be Performed By: _____ (Permittee, Tank Owner, Property Owner or Licensed Service Provider)	License # _____ (Service Provider)
Phone: _____	Mobile Phone: _____

**THIS FORM MUST BE SUBMITTED BY THE UST PERMITTEE 30 DAYS BEFORE START OF WORK
YOU MUST CONTACT YOUR LOCAL DEQ REGIONAL OFFICE
3 DAYS BEFORE STARTING ANY MODIFICATION WORK.**

Date work is scheduled to begin: _____ (Phone numbers for 3-day telephone notice are listed on Page 2)

TANK #	DEQ-UST PERMIT #	TANK SIZE IN GALLONS	PRODUCT	DESCRIBE WORK TO BE PERFORMED: (Attach separate sheets if additional space is needed; include Tank # and Permit #.)

Permittee: _____
(Please Print)

Signature: _____ Date: _____
(Permittee)

THIS NOTICE AND THE 3-DAY TELEPHONE NOTICE ARE REQUIRED prior to starting work to modify underground storage tank components, including the repair or replacement of metal underground piping. Modification includes but is not limited to underground piping (product, vent and vapor recovery piping), tank lining, leak detection equipment, monitoring and observation wells, and cathodic protection. (See OAR 340-150-0352).

THIS NOTICE IS NOT REQUIRED for maintenance work on components (replacement or repair) or installation of aboveground piping, such as installation and connection of dispensers and pumps to underground piping. (See OAR 340-150-0350 & -0354).

THIS NOTICE IS NOT REQUIRED for installation of a new tank system. Instead, a *General Permit Registration Form to Install and Operate USTs* and the appropriate general permit registration fee must be submitted **30-days prior to start of work**.

MAKE SURE THIS FORM IS COMPLETE. A notice that is incomplete or unsigned will not be accepted by the Department and will be returned to permittee for completion.

IF YOU ARE PERFORMING WORK ON ANY EQUIPMENT DESIGNED TO CONTROL GASOLINE VAPORS OR THAT INCREASES THE GASOLINE CAPACITY OR THROUGHPUT OF YOUR FACILITY, in addition to submitting this form, contact DEQ at DEQinfo@deq.state.or.us or 503-229-5696 and ask for an Air Quality contact

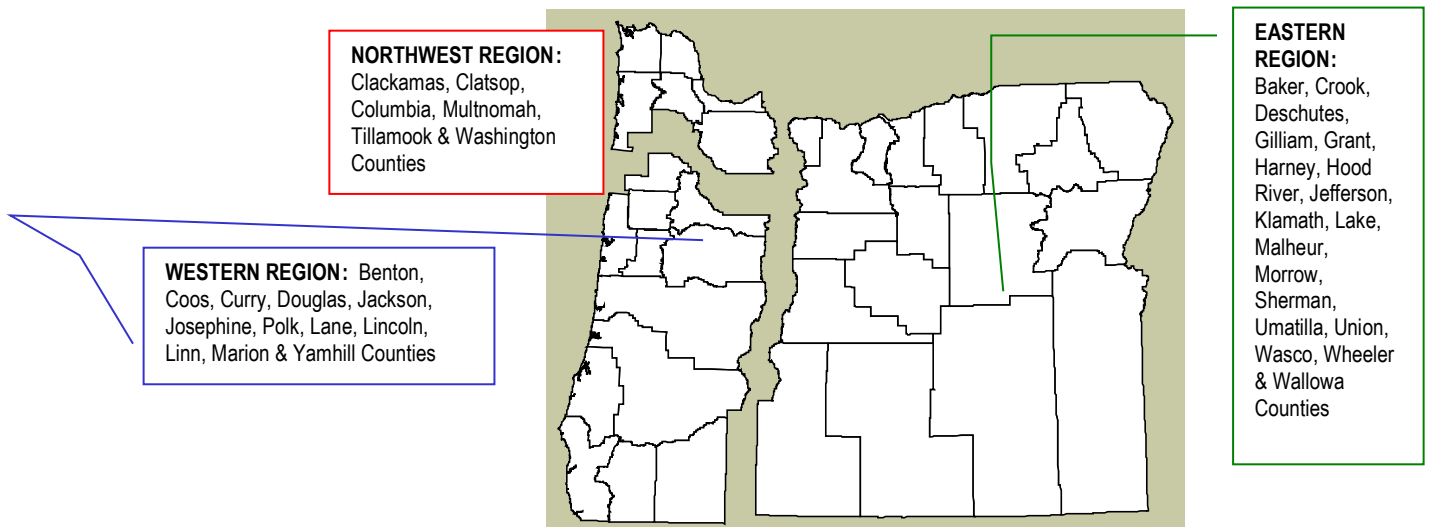
RETURN COMPLETED AND SIGNED FORM TO THE DEQ REGIONAL OFFICE FOR YOUR AREA.

Submittals for Eastern Region counties can go to Portland, Eugene or Medford.

(Addresses are listed below).

3-DAY NOTICE: Contact your local DEQ Regional Office 3-days before starting work.

(Phone numbers are listed below).



EUGENE OFFICE 165 EAST 7 TH AVE., SUITE 100 EUGENE, OR 97401 Phone: 541-686-7838 Fax: 541-686-7551	PORTLAND OFFICE 700 NE MULTNOMAH ST., SUITE 600 PORTLAND, OR 97232 Phone: 503-229-5263 Fax: 503-229-6945	MEDFORD OFFICE 221 STEWART AVE., SUITE 201 MEDFORD, OR 97501 Phone: 541-776-6010 Fax: 541-776-6262
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**For information or assistance with this form call (503) 229-6652 or the UST HELPLINE:
1-800-742-7878 (Toll Free in Oregon).**

**Program information, registration forms, administrative rules and
other publications can also be found on our Web Site at:**

<http://www.deq.state.or.us/lq/tanks/ust/index.htm>