NAVAJO NATION ENVIRONMENTAL PROTECTION AGENCY
Underground/Aboveground Storage Tank Programs
PO Box 339 Window Rock, AZ  86515

Aboveground and Underground Storage Tank Information Form

Facility Name: __________________________
Contact person: __________________________ Title: __________________________

Type of Facilities (mark all that apply):

- Gas Station
- Railroad
- Industrial
- Construction
- Public Schools
- Utility
- Pipeline
- Trucking/Transportation
- Agriculture
- Airline
- Oil & Gas
- Mining
- Public Transportation
- Indian Health Services
- NN Gov’t
- BIA
- NAVAJO NATION ENVIRONMENTAL PROTECTION AGENCY

Types of tanks on site (number of tanks): UST ______ AST ______

Lease No. __________________________

Dates of Lease: Beginning: ________________ Ending: ________________

Current Tank Status:

- Old facility (tanks installed before 1988) ______
- New Facility (tanks were installed after 1988) ______
- Active ______ Inactive ______ Upgraded ______ Abandoned ______ Other ______

Explanation: ____________________________________________________________________________________________

__________________________________________________________________________________________

LOCATION OF TANKS

Physical location of facility: __________________________

UTM Coordinates (If known) __________________________

Mailing Address: __________________________________________

City __________________________ State ________________ Zip Code ________________

Phone Number: (_____)_________________ Fax Number: (_____)_______________

Agency: __________________________________________

Navajo AST Number (If known)_________________

Navajo UST Number (If known)_________________

OTHER RESPONSIBLE PARTIES

Name of Leaseholder: __________________________
Operator Name/Title (If different from leaseholder): __________________________

Mailing Address: __________________________

Area Code ________________ Phone Number __________________________

City __________________________ State ________________ Zip Code ________________

Subleasee or responsible party (If different from above): __________________________

Area Code ________________ Phone Number __________________________
CHECK WHICH OF THE FOLLOWING YOU KEEP ON FILE:

<table>
<thead>
<tr>
<th>Inventory Records*</th>
<th>Emergency Response Plan*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Leak detection Records</td>
<td>Corrective Action Plan*</td>
</tr>
<tr>
<td>(Tank Integrity Testing Records)</td>
<td>Corrosion Protection Records*</td>
</tr>
<tr>
<td>Factory Tank Specifications*</td>
<td>Site Assessment Reports*</td>
</tr>
<tr>
<td>(Tank Installation Records)*</td>
<td>Tank Notification (UST only)*</td>
</tr>
<tr>
<td>General Location Site Map*</td>
<td>Self-certification Form (UST only)*</td>
</tr>
<tr>
<td>Detailed Site Map*</td>
<td>SPCC Plan (AST only)*</td>
</tr>
<tr>
<td>Health &amp; Safety Plan</td>
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</tbody>
</table>

* The most recent copies of the above items need to be submitted to our office. Navajo Nation Environmental Protection Agency needs to be notified of all spills.

Do you have proof of financial responsibility for your tank(s)?

yes ______ no ______

If so, what method are you using? (i.e. insurance, bonds, letter of credit, self insurance, risk retention group, guarantee, or other).

With whom: ________________________________

Complete the following information about each UST. If you have more than four USTs, please make copies of this page and number accordingly. Attach copy of USEPA "Self Certification" form for detailed information. List all tank(s) even if they are not in use.

**FOR USTs ONLY**

1) How many USTs are on site? ________

2) Product in tank(s) (i.e. gasoline, diesel, waste oil, heating oil)

3) Size of tank(s) (gal)

4) Material(s) of tank construction

5) Corrosion Protection? yes/no

   If yes, describe

6) Spill and overfill protection? yes/no

7) Leak detection? (1993 deadline) yes/no

   If yes, describe method of detection

   Date of last tank and line tightness tests.

8) What type of pavement surface covers tank(s)?

9) Date(s) of installation.

10) Name of contractor who did installation.

11) Currently in operation? yes/no

   If not in operation, last date of use.

12) If tanks aren't in operation, permanently out of use? yes/no

13) When will you remove the tanks? (dates)

14) What pavement surface covers pipeline(s) (asphalt, cement, dirt, other)

15) Piping materials. (type)

   Describe method of leak detection for piping.

16) Length (ft) of piping for each tank(s).

17) Date of last compliance check by NNEPA and/or USEPA

18) Tank Serial No. or UL No.

If tank(s) were removed and are not listed above, please describe as follows:

Number, Size, Dates of removal, and Age of tank(s) at time of removal ____________________________________________________________

Name of contractor, who coordinated the removal (if known) ______________________________________________________________

Page 2 of 4
Complete the following information about each AST. If you have more than four ASTs, please make copies of this page and re-number accordingly.

**FOR AST ONLY**

<table>
<thead>
<tr>
<th>Question</th>
<th>AST#1</th>
<th>AST#2</th>
<th>AST#3</th>
<th>AST#4</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) How many ASTs are on site?</td>
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<tr>
<td>2) Product in tank(s), (i.e. gasoline, diesel, motor oil, propane)</td>
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<td>3) Size of tank(s) (gal)</td>
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<td>4) Type of AST tank(s) (UL#, vaulted, other brand)</td>
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<td>5) Date of installation</td>
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<td>6) Currently in operation? yes/no</td>
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<td>7) If not in operation, last date(s) of use</td>
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<td>8) Permanently out of use? yes/no</td>
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<td>9) What type of foundation for ASTs? (if any)</td>
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<td>10) Corrosion protection? yes/no</td>
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<td>11) Spill and overfill protection? yes/no</td>
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<td>12) Leak detection? yes/no</td>
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<tr>
<td>13) Is the tank(s) bermed? yes/no</td>
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<td>What type of liner? (if any)</td>
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<td>14) Secondary containment. yes/no</td>
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<td>15) Distance of tank(s) from building or property(ft)</td>
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<td>16) Distance between tank(s)</td>
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<tr>
<td>17) What pavement surface covers pipeline</td>
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<td>(cement, asphalt, dirt, other)</td>
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<td>18) Piping materials and size (type)</td>
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<td>19) Length (ft) of piping for each tank(s).</td>
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<td>20) Integrity testing? (what type)</td>
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<td>21) Date of integrity testing.</td>
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<td>22) Date of last compliance check by NNEPA and/or USEPA</td>
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<td>23) Tank Serial No. or UL No.</td>
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</tbody>
</table>

If tank(s) have already been removed, describe the tank(s) which were removed, age and size of the tank(s) and date(s) of removal.

Name of contractor, who coordinated the removal.

Was piping removed? Yes/No

**GENERAL INFORMATION**

Please list other information about the ASTs and USTs, if any:

Nearest drinking water well, livestock well and injection well, etc

Provide UTM coordinates for the well. (if possible)

Depth to groundwater (ft)

Name of nearest waterway. (if applicable)

Proximity of tank(s) to nearest waterway

Proximity of tank(s) to nearest residence

Is there a soil landfarm on site? yes/no

A soil stockpile? yes/no

If so, where are they located

What is your protocol for reporting spills?

Page 3 of 4
FOR USTs ONLY

Please describe your plans to comply with federal regulations, etc. in the near future prior to 1998 UST deadline or ending of lease. (Failure to describe compliance measures implies non-compliance):

Has an environmental site assessment been done for leasing purposes?  Yes ____  No ____
If so, please attach copy of findings. If not, please indicate plans to do so.

Has the Navajo Historic Preservation Department completed a survey of the site?  Yes ____  No ____
If so, please attach copy of findings

FOR ASTs ONLY

Please describe your plans to comply with federal regulations, etc. in the near future or ending of lease.
(FAILURE TO DESCRIBE COMPLIANCE MEASURES IMPLIES NON-COMPLIANCE):

Has the Navajo Nation Fire Department completed their inspection and given clearance?  Yes ____  No ____
Has the Navajo Department of Risk Management completed their assessment?  Yes ____  No ____
Has the Navajo Historic Preservation Department completed a survey?  Yes ____  No ____
Has an Environmental Site Assessment (ESA) been done for leasing purposes?  Yes ____  No ____

* If you have answered yes to any or all of the above questions, please attach copy of findings.

Please return this signed UST/AST "Tank Information Form (TIF)" to NNEPA

I have read the tank information form and understand my responsibility for reporting the information and meeting compliance deadlines for underground and/or aboveground storage tanks.

I, ______________________________________ Leasee or Subleasee of ________________________________________

PRINT NAME

NAME OF BUSINESS

submit, date, and sign this form on ________________________________

DATE

SIGNATURE

FOR OFFICE USE ONLY

Assigned Navajo UST/AST#: ________________________________
Date Data Entered: _____/_____/_____
Data Entry Initials: ________________________________
Tank fees paid: □ Registration  □ Annual
Date paid: _____/_____/_____
Comments: ____________________________________________