

# UST-15A

FOR TANKS IN  
**NC**

## OWNERSHIP OF UST SYSTEM(S)

RETURN  
COMPLETED  
UST-15A FORM  
TO:

NC DEPARTMENT OF ENVIRONMENT & NATURAL RESOURCES  
DIVISION OF WASTE MANAGEMENT / UST SECTION  
1637 MAIL SERVICE CENTER  
RALEIGH, NC 27699-1637  
ATTN: REGISTRATION & PERMITTING  
(919) 733-8486

### I. INSTRUCTIONS

\*Pursuant to NCGS 143-215.94A and 15A NCAC 2N .0203, **owner** means: "any person who owns a UST system used for storage, use, or dispensing of regulated substances."

If signing as an officer of a corporation, representative of a public agency, administrator of an estate, or as having power of attorney, you must provide a copy of the legal document that proves you can legally sign in such capacity

### II. OWNER\* OF UST SYSTEM(S)

### III. LOCATION OF UST SYSTEM(S)

Name of Corporation, Individual, Public Agency, or Other Entity	Facility Name
Street Address	Street Address
City	City
County	County
State	State
Zip Code	Zip Code
( ) Telephone Number	( ) Telephone Number
<input type="checkbox"/> Check here if UST owner is also the owner of the property where USTs are located	Facility ID# (if known)
Federal Tax ID# or Social Security	Number of small (# 3,500 gallons) tanks located at this facility
Date ownership began	Number of large (>3,500 gallons) tanks located at this facility
Signature of owner of UST systems	Date

### IV. NOTARY ACKNOWLEDGEMENT FOR OWNER OF UST SYSTEM(S)

\_\_\_\_\_  
\_\_\_\_\_  
County

I, \_\_\_\_\_, a Notary Public for said County and State, do hereby certify that \_\_\_\_\_ personally appeared before me this day and acknowledged the due execution of the foregoing instrument.

Witness my hand and official seal, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

(Official Seal)

My Commission Expires: \_\_\_\_\_

