



Petroleum Storage Tank Bureau  
 1170 North Solano Drive, Suite M  
 Las Cruces, NM 88001  
 (575) 524-6300  
 (575) 526-3891 (fax)

**30-Day Notification of Change-in-Service, Permanent Closure, Return-to-Service, or Temporary Closure**

**I. Date:**

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**II. Notification Type:** ( Change-in-Service) ( Permanent Closure) ( Return-to-Service)  
 ( Temporary Closure)

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**III. Contractor Information**

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Contractor Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**IV. Owner Information**

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Owner Name: \_\_\_\_\_ Owner ID: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**V. Facility Information**

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Facility Name: \_\_\_\_\_ Facility ID: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

County: \_\_\_\_\_ Phone: \_\_\_\_\_

**VI. Equipment Information**

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A. Tanks. ( AST) ( UST) ( N/A; tank status will not change)

Tank#	Capacity	Material / Model (i.e. FRP, ACT-100, or Fireguard)	Content

B. Piping. ( Steel) ( Fiberglass Reinforced Plastic) ( Flexible) ( Unknown)

( N/A; piping status will not change)

**VII. Tentative Date for this Project to Start:**

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**VIII. Planned Actions during this Project**

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- A. ( Yes) ( No) ( N/A) Contact Local or State Fire Marshall prior to removal of tanks or piping.
- B. ( Yes) ( No) ( N/A) Sample soil or water in accordance with 20.5.8.12 NMAC.
- C. ( Yes) ( No) ( N/A) Perform a tank tightness test along with a tightness test of all associated underground piping before a Return-to-Service of a storage tank system.
- D. ( Yes) ( No) ( N/A) Follow all applicable requirements in Title 20 Chapter 5 of the New Mexico Administrative Code, as well as, all applicable national standards such as API 1604 for the permanent closure of UST systems.

**IX. Close Tanks in Place** ( Yes) ( No)

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**The UST(s) listed in Section VI is/are to be permanently closed by filling with an inert solid material. The AST(s) listed in Section VI is/are to be permanently closed in accordance with 20.5.8.10.A(2) NMAC.**

**X. Close Piping in Place** ( Yes\*) ( No)

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The piping listed in Section VI is to be permanently closed in accordance with 20.5.8.10 NMAC.

(\*Note: If you mark, yes, for piping associated with an AST system you must submit a closure plan that will be reviewed by the Bureau, and approval by the Bureau must be granted before piping can be closed in place.)

**XI. Signatures**

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Print Name

Title

Signature of Owner or of Owner's Authorized Representative

Date