UST Compliance Manager Registration MISSISSIPPI DEPARTMENT OF ENVIRONMENTAL QUALITY

- > This form shall be submitted to the MDEQ for notification of designated UST Compliance Manager for underground storage tank (UST) facilities.
- ➤ Documentation of the successful completion of an MDEQ approved UST Compliance Manager program must be submitted with this form for the registration to be complete.

Submitted with this form for th	e registi	Tation to be comple					
UST Compliance Manager			UST Tank Owner/Operator				
Name			Owner Name:				
Mailing Address			Mailing Address				
City	State	Zip	City		State	Zip	
e-mail			Owner Contact:			1	
Phone			Phone				
Relation to listed UST Facility(ies) Owner Operator	Emplo	oyee Service	Technician 🔲 Thi	rd Party 🔲	Other		
Training Completion Date:							
Training Source MDEQ Seminar/Workshop	□ _{Thire}	d Party Course	Other (specify):				
UST Faci	lities	Managed by	UST Complia	nce Mana	iger		
Facility Name		Address		City			Fac ID#
I hereby certify that the forgoing in Manager for the UST facilities liste			te, and complete and	d that I am th	e UST (Compli	ance
UST Compliance Manager Name	S	ignature of UST Compl	compliance Manager]	Date	
I hereby certify that the forgoing ir will serve as the designated UST					ST Con	nplianc	e Manager
UST Owner	S	ignature of UST Owner			1	Date	

UST Compliance Manager Registration (Additional Facilities)

UST Facilities Managed by UST Compliance Manager

Facility Name	Address	City	Fac ID#
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