Aboveground Storage Tank Change of Ownership

Submit to: Kansas Department of Health and Environment
Bureau of Environmental Remediation
Storage Tank Section
1000 SW Jackson, Suite 410          Phone: 785-296-8061
Topeka, KS 66612-1367
Fax: 785-559-4260

*** YOUR OWNERSHIP CHANGE WILL ONLY BE PROCESSED WHEN KDHE RECEIVES A COPY OF YOUR REAL ESTATE PURCHASE AGREEMENT AND THIS FORM NOTORIZED. ***

KDHE Facility I.D. Number_____________    KDHE Facility I.D. Number______________
Please Print Clearly or Type: (Assigned by KDHE)

I. EXISTING FACILITY INFORMATION

Name__________________________________ Name________________________________________
Address________________________________ Address______________________________________
_______________________________________ _____________________________________________
Contact________________________________ 24-hour contact_____________________________
Number of Aboveground tanks at this location:
Active*____ Exempt*_____ Temporary   24-hour phone ____ - ______-_________
Out of Service_____ ____________________

Previous Owner I.D. Number________________
Name___________________________________
Address________________________________
Name___________________________________
Address________________________________

II. EXISTING TANK OWNER INFORMATION

Previous Owner I.D. Number________________ *Changes in ASTs being used or not being used should be submitted on a KDHE Change of Status form.
Name___________________________________

NEW OWNER INFORMATION

Address_________________________________ Owner I.D. Number_____________________________
(if the new owner currently has other facilities)
Name___________________________________

New Owner Type:                      Address________________________________________
State/Local Gov't_____ Federal______     ________________________________
Private______                          _____________________________________________

Will the system be used for purposes of retail sales? Yes____ No____
Has property including tanks been sold? Yes____ No____
Have tanks only been sold and moved? Yes____ No____
Date of Sale _________________________

E-Mail address: ____________________________

OWNER CERTIFICATION

I certify that the information above is true to the best of my knowledge.

_________________________________________     __________________________
Owner's Signature                    Date

Change Processed By:_____________________
Date: ________________________