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|  | Leak site ownership formPetroleum Remediation Program |

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| **Instructions:** Within 30 days of receipt, please complete this form and return to the MPCA project manager. | **Leak Site ID:** |  | **/ AI ID:** |  |

## Property ownership

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| Do you own the property where the tank is or formerly was located? [ ]  Yes [ ]  NoIf **yes**, complete the following to ensure we have accurate information: |
| Corporation name if applicable: |       | [ ]  Individual [ ]  Corporation |
|  | Mailing address: |       |
|  | City: |       | State: |       | Zip code: |       |
|  | Phone: |       | Email: |       |
| If **no**, list current property owner: |       | [ ]  Individual [ ]  Corporation |
| If the tanks have been removed from the site, who was the property owner at the time of tank removal? |
| Property owner at time of removal: |       | [ ]  Individual [ ]  Corporation |
| Corporation name (if applicable): |       |
|  | Mailing address: |       |
|  | City: |       | State: |       | Zip code: |       |
|  | Phone: |       | Email: |       |

## Tank ownership

|  |  |
| --- | --- |
| If the tank owner is different from the property owner, please list tank owner name: |       |
| Explain: |       |
| If the tanks have been removed from the site, who was the tank owner at the time of tank removal? |
| Tank owner at time of removal: |       | [ ]  Individual [ ]  Corporation |
| Corporation name (if applicable): |       |
|  | Mailing address: |       |
|  | City: |       | State: |       | Zip code: |       |
|  | Phone: |       | Email: |       |

## Tank operator

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| If a separate party operates the tank, please complete the following:  |
| Tank operator: |       | [ ]  Individual [ ]  Corporation |
| Corporation name (if applicable): |       |
|  | Mailing address: |       |
|  | City: |       | State: |       | Zip code: |       |
|  | Phone: |       | Email: |       |

## Environmental consultant

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| If you are working with an environmental consultant, please provide the following:  |
| Consultant company name: |       | Contact name: |       |
| Is the property undergoing development or a property transfer? | [ ]  Yes [ ]  No |

## Intent to proceed

|  |
| --- |
| Do you intend to proceed with the necessary investigation and potential corrective action as described in the attached letter? |
| [ ]  Yes [ ]  No If no, please describe why: |       |
| Print name: |       | Signature: |       | Date: |       |

*[ ]  – Check if electronically signing and type name in Signature field. I certify that I have electronically signed this document.*