



COUNTY OF SAN DIEGO CUPA
DEPARTMENT OF ENVIRONMENTAL HEALTH
HAZARDOUS MATERIALS DIVISION
P.O. BOX 129261, SAN DIEGO, CA 92112-9261
(858) 505-6880 FAX (858) 505-6848 1-800-253-9933
<http://www.sdcdeh.org>

Designation of Underground Storage Tank (UST) Operator

UST Owner Statement of Understanding and Compliance with UST Requirements

Facility Name:	Facility Permit #:						
Facility Address:	Phone: ()						
City:	Zip Code:						

Reason for Submitting this Form (*Check One*) Initial Certification Change of Designated Operator Certificate Renewal

Designated UST Operator(s) for this Facility

PRIMARY DESIGNATED UST OPERATOR

Designated Operator's Name:	Relation to UST Facility (Check One)
Business Name (If different from above):	<input type="checkbox"/> Owner <input type="checkbox"/> Operator <input type="checkbox"/> Employee
Designated Operator's Phone #:	<input type="checkbox"/> Service Technician <input type="checkbox"/> Third-Party
International Code Council Certification #:	Expiration Date: ____ / ____ / ____

ALTERNATE 1 (Optional)

Designated Operator's Name:	Relation to UST Facility (Check One)
Business Name (If different from above):	<input type="checkbox"/> Owner <input type="checkbox"/> Operator <input type="checkbox"/> Employee
Designated Operator's Phone #:	<input type="checkbox"/> Service Technician <input type="checkbox"/> Third-Party
International Code Council Certification #:	Expiration Date: ____ / ____ / ____

ALTERNATE 2 (Optional)

Designated Operator's Name:	Relation to UST Facility (Check One)
Business Name (If different from above):	<input type="checkbox"/> Owner <input type="checkbox"/> Operator <input type="checkbox"/> Employee
Designated Operator's Phone #:	<input type="checkbox"/> Service Technician <input type="checkbox"/> Third-Party
International Code Council Certification #:	Expiration Date: ____ / ____ / ____

NOTIFY THE LOCAL REGULATORY AGENCY WITHIN 30 DAYS OF ANY CHANGES TO THIS INFORMATION

I certify that, for the facility indicated at the top of this page, the individual(s) listed above will serve as Designated UST Operator(s). The individual(s) will conduct and document monthly facility inspections and annual facility employee training, in accordance with California Code of Regulations, Title 23, Sections 2715(c) - (f).

Furthermore, I understand and am in compliance with the requirements (statutes, regulations, and local ordinances) applicable to underground storage tanks.

NAME OF TANK OWNER OR OWNER'S AGENT (Please Print) _____ DATE: ____ / ____ / ____

SIGNATURE OF TANK OWNER OR OWNER'S AGENT _____ OWNER'S PHONE #: () _____

Return this completed form to: **HMD-Designated UST Operator**
P.O. Box 129261, San Diego, CA 92112-9261

**UNDERGROUND STORAGE TANK (UST) DESIGNATED OPERATORS
and
UST OWNER COMPLIANCE STATEMENT**

The State Water Resources Control Board (SWRCB) has adopted changes to the Underground Storage Tank (UST) regulations that require USTs owners to submit a signed statement to the Certified Unified Program Agency (CUPA) indicating that the owner understands and is in compliance with all underground storage tank requirements, and identifying the **Designated UST Operator(s)** for each facility they own. The signed statement must be submitted to the CUPA. The Hazardous Materials Division (HMD) is the CUPA responsible for implementing the UST program in San Diego County.

The definition of a **Designated UST Operator** can be found in Title 23 of the California Code of Regulation, section 2715(b)-(f). A **Designated UST Operator** means one or more individuals designated by the UST owner to have responsibilities for training facility employees and conducting a monthly visual inspection at the UST facility. The "designated UST operator" must:

- Posses a current "California UST System Operator" certification issued by the International Code Council (ICC). Certification must be renewed every 24 months.
- Provide on-the-job training for facility employee(s). Initial training is required by July 1, 2005. Facility employees hired on or after **July 1, 2005** must complete initial training within 30 days from their date of hire.
- Perform monthly visual inspections and record results on an inspection report, which must be provided to the owner/operator from their date of hire. For your convenience, a checklist for visual inspections (Form HM-9175) is available on the Hazardous Materials Division web site, <http://www.sdcdeh.org> . Keep this completed form with your monthly records.

The **Designated UST Operator** must be able to perform the required tasks on the timelines specified in regulations. As long as ICC certifies the individual, the **Designated UST Operator** could be the UST facility owner, operator, employee, service technician, or a third-party. Submit the name of the **Designated UST Operator(s)** for each facility you own using the **Form HM-9174 to HMD**. This form also serves as the UST owner compliance statement. Also be aware that UST owners must notify the HMD within 30 days of any change of **Designated UST Operator(s)**.

For more information about the new UST regulations and to find out more about training requirements for UST Designated Operators, visit the State Regional Water Regional Control Board at http://www.waterboards.ca.gov/water_issues/programs/ust/training/ or call the Hazardous Materials Duty Desk at 858-505-6880.