

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.

UST Compliance Manager				UST Tank Owner/Operator			
Name		CM #		Owner Name:		Owner ID #	
Mailing Address				Mailing Address			
City	State	Zip		City	State	Zip	
e-mail				Owner Contact:			
Phone				Phone			

Relation to listed UST Facility(ies)
 Owner Operator Employee Service Technician Third Party Other _____

Training Completion Date: Initial Training Retraining

Training Source
 MDEQ Seminar/Workshop MDEQ Exam Third Party Course In-house Training Reciprocity

UST Facilities Managed by UST Compliance Manager

Facility Name	Address	City	Fac ID #

I hereby certify that the forgoing information is true, accurate, and complete and that I am the UST Compliance Manager for the UST facilities listed on this form.

UST Compliance Manager Name	Signature of UST Compliance Manager	Date
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I hereby certify that the forgoing information is true, accurate, and complete and the listed UST Compliance Manager will serve as the designated UST Compliance Manager for my facilities listed on this form

UST Owner	Signature of UST Owner	Date
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