

Department of Environmental Protection

2600 Blair Stone Road ♦ Tallahassee, Florida 32399-2400

DEP Form: 62-761.900(8)
Form Title: Limited Closure Report
Effective Date: January 2017

Incorporated in Rule 62-761.420, F.A.C.

Limited Closure Report Form for USTs

This form is required to be completed for facilities performing an underground storage tank (UST) closure in accordance with Rule subsection 62-761.800(2), F.A.C. This form is required at facilities where a Closure Integrity Evaluation passed or where a failed Closure Integrity Evaluation was investigated prior to closure and it was determined that a discharge did not occur. This form shall be submitted to the County via email or mail within 60 days of completion of the closure describe below.

| Complete All Applicabl | e Blanks i | Print or Type |
|--|--|---|
| FDEP Facility ID Numbe | r: | Date of Closure: |
| Facility Address: | | |
| Owner Name: | | Owner Phone Number: |
| Owner Mail or E-mail A | ddress: | |
| I. Storage Tank | System Closure Infor | <u>mation</u> |
| The following were closed | : (Fill in ID of the comp | onent being closed and check appropriate box) |
| Tank Registration Identif | ication number(s): | |
| | Removed | |
| | Closed In-Place | |
| Piping associated with ta | ink number(s): Removed | |
| | Closed In-Place | |
| Piping Sumps associated | with tank number(s): Removed | |
| | Closed In-Place | |
| Spill Containment Syster tank number(s): | ns associated with Removed Closed In-Place | |
| Dispenser Sumps associanumber(s): | ited with dispenser | |
| | Removed | |
| | Closed In-Place | |

II. <u>Closure Integrity Evaluation Information</u>

A Closure Integrity Evaluation is required prior to the closure of the system components listed above.

| | | Yes | No | |
|----|--|--------------|---|--|
| A. | Was a Closure Integrity Report [Form 62-761.900(7)] submitted to the County prior to closure? If No, then DO NOT USE THIS FORM. A closure investigation is required in accordance with "Instructions for Conducting Sampling During Underground Storage Tank Closure" and a Closure Report must be submitted. If Yes, attach a copy of the Closure Integrity Report [Form 62-761.900(7)]. | | (Attach copy of Closure Integrity Report) | |
| В. | Was an incident discovered during the evaluation? If No , proceed to II.C., then Section III. <u>Closure Summary.</u> If Yes , then proceed to next question. | | (Proceed to II.C., then Sections III.) | |
| | Was an incident Notification Form (INF) submitted to the County [Form 62-761.900(6)]? If Yes, attach copy of INF. If No, complete INF and attach, or attach response as to why INF not submitted. | (Attach INF) | (Complete INF or Response) | |

| | Yes | No |
|---|--|--------------------|
| Was an incident investigation conducted PRIOR to closure? | | • |
| If No, then DO NOT USE THIS FORM. A closure investigation is required in accordance | ce | |
| with "Instructions for Conducting Sampling During Underground Storage Tank Clos | sure" and a Closure | |
| Report must be submitted. | | |
| If Yes , then proceed to the next question. | (Proceed to next que | estion) |
| Did the investigation confirm that the incident was not a discharge? | | |
| If No, then DO NOT USE THIS FORM. A closure investigation is required in accordance | | |
| for Conducting Sampling During Underground Storage Tank Closure" and a Closure | re Report must be | |
| submitted. | | |
| | | en confirmation |
| If Yes , attach copy of written confirmation. | | |
| C. Were wastes properly managed or disposed of in accordance with Department r | | |
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| This form is required for facilities performing a closure in accordance with Rule subsection 62-761.800(2), F.A.C. Documentation of the closure shall be reported on this form, along with any attachments. This form shall be submitted to the County via email or mail within 60 days of completion of the closure. | | | | | | |
|---|---|--|--|--|--|--|
| Owner or Operator Signature | Signature of person performing Closure | | | | | |
| Print or type Owner or Operator Name | Print or type name of person performing Closure | | | | | |
| Date of Owner or Operator Signature | Date of signature of person performing Closure | | | | | |