

Notification of Change-in-Ownership Of Petroleum Storage Tank Systems



The purpose of this form is to notify the Petroleum Storage Tank Bureau's staff of the change in ownership of the petroleum storage tank systems listed below. The owner must submit the form within 30 days of transfer of ownership of the petroleum storage tank systems, regardless of whether the systems are underground storage tank systems or above-ground storage tank systems. Once the completed form is submitted to the Bureau, the new owner (transferee) of the petroleum tank system(s) will be responsible for payment of annual tank fees the first July 1 after the transfer and every year thereafter. If there has been a change to the petroleum storage tank system at the facility, such as one of the tank systems has been modified, then you must fill out a Registration Form including all information required in 20.5.102.206 NMAC and submit that form to the Bureau instead of this form. A copy of our Registration Form can be downloaded from https://www.env.nm.gov/petroleum storage tank Mail the completed form to:

> **New Mexico Environment Department Petroleum Storage Tank Bureau** 2905 Rodeo Park Drive East, Bldg. 1 Santa Fe, NM 87505

## I. **Facility Information**

Facility Name (Enter the	previous/old name of the facility)		Facility ID Number
New Facility Name (Hav	e you changed the name of the facility	? Then enter the new name on the	line above.)
Street Address			City
Zip Code	County	Telephone Number	
Previous Owner of Tank(s	)		
Owner Name			Owner ID Numb
Street Address			City
State	Zip Code	County	Telephone Number
<u>New Owner of Tank(s)</u>			
Owner Name (Corporatio	on, Individual, Public Agency, or Other	r Entity)	Owner ID Number
Street Address			City
State	Zip Code	County	Telephone Number

## IV. **Operator Information**

Facility ID Number:

Will the operator of the facility change with the change in ownership? If your answer is yes, then complete this section to the best of your ability.

Operator Name			Telephone Number
Mailing Address			City
State	Zip Code	E-mail Address	
Date tank system(s) tra	nsferred		
. Number of Petroleum Stor		ility:	
	age Tank Systems at this fac		
	age Tank Systems at this fac		Telephone Number
	age Tank Systems at this fac		Telephone Number

## VII. Certification

I certify under penalty of law that I have personally examined and I am familiar with the information submitted in this and all attached documents, and based on my inquiry of those individuals immediately responsible for obtaining the information; I believe the submitted information is true, accurate, and complete.

Name and Official Title of Owner or Owner's Authorized Representative

**Owner's Signature** 

Date Signed