



Notice of Intent to Permanently Close Storage Tank Systems or Change-in-Service (Updated 2/26/2024)

Notify the Division of Oil and Public Safety (OPS) in writing at least 10 days before beginning either permanent closure or change-in-service of an aboveground (AST) or underground (UST) storage tank and underground piping. The closure notice must be sent via email to cdle_technical_assistance@state.co.us with the subject line "NOI FID XXXXX, Facility Name, Facility Address". Closure notices will expire 60 days after the date received by OPS. **Local fire departments also require advance notice of tank closure.**

Permanent closure of a UST can be accomplished by either removing the tank or by filling it with an inert substance. Permanent closure of an AST can be accomplished by removing the tank or by safeguarding it pursuant to the regulations. Change-in-service for a UST or AST means continued use of the tank to store a non-regulated substance. If changing from one regulated product to another, the **Change in Product Form** is used instead of this form. All fuel system components must be compatible with the product to be stored with a change in service or product.

Permanent closure or change-in-service of a UST or AST requires that the tank be emptied and cleaned and that a site assessment be conducted. **If you are seeking the elimination of tank related sampling for AST closure, recent photos of the tank system and the last 12 months of release detection records must be submitted with this form.** If a release or suspected release (contaminated soil, contaminated groundwater, free product or vapors) is discovered, it must be reported to OPS within 24 hours by calling 303-318-8547.

If the proposed date for closure or change in service needs to be changed, allow at least 72 hours notice for OPS scheduling.

Submission of an **Environmental Site Assessment Closure Report** is required on all closures and changes in service within **30 days** following the activity. If no contamination is discovered, you are also required to include a narrative explaining the closure activities and the results of sample analysis, a site figure to scale (depicting all fuel system components, sample locations and depths) and corresponding laboratory analytical documents. If you are requesting a **No Further Action Letter** from OPS, please do so in the narrative. **Reports must be submitted through the FTP and will not be accepted via email.**

Please refer to Colorado's [Petroleum Storage Tank regulations](#) for more details on tank closure or change-in-service, site assessment, release reporting, release investigation, remediation and record keeping requirements.

Add the Tank Name to the NOI Form. Information including Facility ID, Tank Name, and Tank Tag can be accessed by searching for the facility in the [COSTIS-IA database](#).

To report a suspected or confirmed release discovered at closure or change-in-service, call the OPS Technical Assistance line within 24 hours of discovery at 303-318-8547.

To obtain copies of report formats, you may download them from [our website](#).



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(Revised 2/26/2024)

Complete this notice and submit it such that it will be received at least 10 days, but no more than 30 days, before closure activities begin. This notice expires 60 days after date received by OPS. **If you are seeking the elimination of tank related sampling for AST closure, recent photos of the tank system and the last 12 months of release detection records must be submitted with this form.**

Date of Closure or Change-in-Service*: _____

Check one option in each row

- | | | |
|---|---|---|
| <input type="checkbox"/> Tank and Piping | <input type="checkbox"/> Tank Only | <input type="checkbox"/> Piping Only |
| <input type="checkbox"/> Permanent Closure - by Removal | <input type="checkbox"/> Permanent Closure - In Place | <input type="checkbox"/> Change-in-Service to Non-regulated Product |

Site Assessment Information

You are required to conduct a site assessment with laboratory analytical data and a figure depicting all fuel system components and sample locations; or the proposed sampling plan, which describes when a site assessment will be completed.

- | | |
|--|---|
| <input type="checkbox"/> Site assessment has been performed. | <input type="checkbox"/> Site assessment will be performed. |
|--|---|

Fire Department Notification Information

Contact your local fire department prior to closure or change-in-service to ensure you comply with their requirements.

Local Fire Department: _____

- | | |
|---|--|
| <input type="checkbox"/> Local fire department has been notified. | <input type="checkbox"/> Local fire department will be notified. |
|---|--|

Facility Information

Facility Name: _____
 Facility ID#: _____
 Facility Address: _____
 City/County/ZIP: _____

Owner Information**

Name: _____
 Company Name: _____
 Owner ID#: _____
 Address: _____
 City/State/ZIP: _____
 Phone Number: _____
 Email Address: _____

Contractor Information**

Name: _____
 Company Name: _____
 Address: _____
 City/State/ZIP: _____
 Phone Number: _____
 Email Address: _____

Tank Information

Date tanks were emptied to less than 1 inch: _____

# of USTs:				# of ASTs:		
UST	AST	Tank Name	Tank Tag #	Install Date (year)	Capacity (gallons)	Product Stored in Tank
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					
<input type="checkbox"/>	<input type="checkbox"/>					

* If this date changes, please notify the Division of Oil and Public Safety immediately.

**Please provide information for the person who should receive the OPS Acknowledgement Letter.

For OPS use only	Date Received: _____	Expiration Date: _____	CLO #: _____	REL #: _____
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