

**Petroleum Underground Storage Tank Release Compensation Board**

Rev. 11/18

Phone: (614) 752-8963 • Toll Free Phone: (800) 224-4659 • Fax: (614) 752-8397 • Website: www.petroboard.org

**Remediation System Disposition Documentation Form**

(please print or type)

**Claim #:** \_\_\_\_\_ **Release #:** \_\_\_\_\_ **Release Site Name:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Owner Name:** \_\_\_\_\_ **Consultant Name:** \_\_\_\_\_ **Contact Person:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **Address:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_  
\_\_\_\_\_ **Email Address:** \_\_\_\_\_

**SYSTEM Type:** \_\_\_\_\_ **Capacity:** \_\_\_\_\_ **gpm** \_\_\_\_\_ **"Hg** \_\_\_\_\_ **scfm** \_\_\_\_\_ **Extraction Points** \_\_\_\_\_

**Date:** \_\_\_\_\_ **# Months Used:** \_\_\_\_\_  
**Purchased**    **Installed**    **Started**    **Shut Down**    **Removed**

Anticipated System Disposition (check one)     Reuse at     Sell to     Dispose at \_\_\_\_\_

**MAJOR SYSTEM COMPONENTS**

<u>Component</u>	<u>Manufacturer</u>	<u>Serial #</u>	<u>Size/Capacity</u>	<u>Condition</u>	<u>Current Location</u>

(attach a separate sheet if necessary)

**Form Completed by:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(please print name & company)

**Consultant Representative:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(signature) | (print)