Iowa Department of Natural Resources
Underground Storage Tank Section
6200 Park Ave Ste 200
Des Moines, IA 50321
www.iowadnr.gov/ust
ustoperations@dnr.iowa.gov

# UST RELEASE NOTIFICATION FORM

**(Completed by the UST Professional and Submitted to DNR UST Section and Owner/Operator)**

A suspected or confirmed release has been identified at your property by your UST professional. Pursuant to Iowa Code section 455B.474 and 567 Iowa Administrative Code (I.A.C.) 135.6(1), **UST system owners and operators** are required by law to report suspected or confirmed releases to the Iowa Department of Natural Resources within 24 hours of discovery, or 6 hours if a hazardous condition exists, unless an exception applies. Please see the Department's Release Guidance at www.iowadnr.gov/ust for more information, including a Release Reporting Form.

If a confirmed release has been identified at your property, your UST Professional is required by 567 I.A.C. 134.17 to submit a copy of this form to the Department within seven days of discovery. This secondary submission does NOT excuse the owner/operator from making the initial reporting as discussed above and in the release guidance. Failure to directly report a suspected or confirmed release may result in the Department taking enforcement action against the owner/operator, to include the assessment of a monetary penalty.

For suspected and confirmed releases, notify the Iowa Department of Natural Resources at 515-725-8694. For hazardous conditions, notify the Department and your local law enforcement.

## SITE INFORMATION

Site Name: _____ UST No: _____

Site Address: _____

City: _____ ZIP Code: _____

## NOTIFIED PARTY

Owner/Operator Name: _____

Notification form sent to (address): _____

City: _____ State: _____ ZIP Code: _____

Owner/Operator Phone Number: _____

Date Notified Orally: _____ Date Notified by Mail: _____

Owner/Operator Signature: _____

## UST PROFESSIONAL

Iowa UST Professional Name: _____

Company: _____ Phone Number: _____

Company Address: _____

City: _____ State: _____ ZIP Code: _____

Iowa UST Professional Signature: _____

## RELEASE

☐ Confirmed Release ☐ Suspected Release Date Discovered: _____

Leak Status: ☐ Continuing ☐ Stopped ☐ Unknown

Description: _____

Recommended Action: _____