DISTRICT OF COLUMBIA
DISTRICT DEPARTMENT OF THE ENVIRONMENT
UST/LUST ACTIVITY NOTIFICATION

PLEASE FILL OUT THIS FORM (AS APPLICABLE)
AND RETURN TO THE UNDERGROUND STORAGE TANK BRANCH, DDOE

DATE: ________________

NOTE: ACCORDING TO UST REGULATIONS, A WRITTEN NOTIFICATION SHALL BE SUBMITTED TO DDOE
UST BRANCH, AT LEAST 5 DAYS PRIOR TO THE ESTIMATED DATE OF ACTIVITY NOTED IN ITEMS 3C
& 4C. IN ADDITION, A VERBAL OR WRITTEN NOTIFICATION SHALL BE PROVIDED AT LEAST 24
HOURS PRIOR TO STARTING OF THE ACTIVITY.

1) Name of Facility: __________________________ Facility ID (if known): ________________
   Site Address: ________________________________________________________________
   Facility Contact: __________________________ Phone #: __________ Email: __________

2) Contractor/Consultant Name: ________________________________________________________________
   Address: ____________________________________________________________________________
   Contractor/Consultant Contact: __________________________ Phone #: __________ Email: __________

3) UST ACTIVITY: Attach A Site Plan.
   NOTE: FOR INSTALLATION/UPGRADE COMPLETE THE UST INSTALLATION/UPGRADE CHECKLIST
   A) Install: ____ Remove: ____ Abandon: ____ Repair: ____ Test: ____
   B) Tank Tightness Test (Method): ____________________________
   C) Estimated Date of Activity: ________________
   D) Total USTs: ______
   E) UST Contents:
      Heating Oil (Grade): ______ Diesel Oil____ Used Oil: ____ Gasoline (Type): ______
      Other (Specify): ____________

4) LUST ACTIVITY: LUST # __________________________ (if known)
   A) Boring or Well Installation (Numbers): _______ / (____) 
   B) Install CAP System (Type): ____________________________
   C) Estimated Date To: Drill Borings/Wells: ___ / ___ / ___ Install CAP System: ___ / ___ / ___.

5) Short Description of the Activity - Attach A Site Plan.
   _______________________________________________________________________
   _______________________________________________________________________
   _______________________________________________________________________

Filers Name (Please Print) __________________________ Signature __________________________ Date ________________

Rev. 03/24/2021 1200 First Street NE, 5th floor, Washington DC 20002, Tel: 202-535-2600, Fax: 202-535-1383, Email: ust.doee@dc.gov, Website: www.doee.dc.gov