

| Name of Owner/Operator | |
|------------------------|--|
| | |

Registration Number (as shown on registration certificate)

SALE OF TANKS: I sold the following described tanks to:

| Email Address | Telephone Number | |
|---------------|----------------------|-------------------------|
| City | State | ZIP Code |
| Date of Sale | I | _ |
| | | |
| | | |
| | | |
| | | |
| | City Date of Sale | City State Date of Sale |

REMOVAL/DISPOSAL OF TANKS: I removed and disposed of the following tanks:

| Underground Tanks Aboveground Tanks | Date of Removal |
|---|-----------------|
| Describe tanks by size and type of product stored in them | |
| Describe method of disposal | |

| Signature of Owner/Operator | Date |
|-----------------------------|------|
| | |

Return this form to:

North Dakota Department of Environmental Quality 4201 Normandy St. Bismarck, ND 58503-1324 Telephone (701) 328-5150 Fax (701) 328-5200 Email: deqptrcf@nd.gov https://deq.nd.gov/Director/PTRCF/