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| **Agency Code:** | **Reporting Period:** |
| Agency Name |  |
| Person Completing Form |  |
| Phone Number |  |
| Email Address |  |
| Will the CUPA be applying red tags in January 2026 to single-walled USTs not properly closed by December 31, 2025? | Yes  No  NA |
| If *No*, how does the CUPA plan to enforce in January 2026 |  |

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|  | **Status or Activity** | **Column A**  Total: Previous  Reporting  Period | **Column B**  Total: Current  Reporting  Period |
| 1 | Regulated UST Facilities |  |  |
| 2 | **Active Petroleum UST Systems at end of period** |  |  |
| 2A | Number of Field Constructed USTs at end of period |  |  |
| 3 | Petroleum UST Systems permanently closed during period |  |  |
| 4 | Petroleum Systems reclassified as TIUGA under APSA |  |  |
| 5 | **Active Non- Petroleum UST Systems at end of period** |  |  |
| 6 | Non-Petroleum UST Systems permanently closed during period |  |  |
| 7 | Non-Petroleum Systems reclassified as TIUGA under APSA |  |  |

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|  | **Technical Compliance Rate** | Total: Current Reporting  Period |
| 8 | Routine UST facility inspections performed this reporting period |  |
| 9 | Facilities in compliance with Spill Prevention (USEPATCR 9a) |  |
| 10 | Facilities in compliance with Overfill Prevention (USEPATCR 9b) |  |
| 11 | Facilities in compliance with Corrosion Protection (USEPATCR 9c) |  |
| 12 | Facilities in compliance with Release Detection (USEPATCR 9d) |  |
| 13 | Facilities in compliance with USEPATCR 9a, 9b, 9c and 9d (USEPATCR 9e) |  |

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|  | **UST Compliance Performance Measures** | Total: Current Reporting  Period |
| 14 | Facilities in compliance with Designated Operator Training (USEPATCR 10) |  |
| 15 | Facilities in compliance with Financial Responsibility (USEPATCR 11) |  |
| 16 | Facilities in compliance with Designated Operator Inspections (USEPATCR 12) |  |

**Corrections to Column A, please explain here:**

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| **Check if NO Red Tags issued this reporting period** |  |
| **Check if NO Abandoned USTs this reporting period** |  |
| **Check if NO Temporary Closed USTs this reporting period** |  |

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| Specific information regarding red tags issued. Please insert below the requested information for  each facility receiving a red tag this reporting period. For Significant Violations, use one or more  of the codes listed below:   **1 - Liquid Release  2 - Impaired leak detection  3 - Chronic or recalcitrant owner/operator** |

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| **Red Tag Facility Name** | **CERS**  **ID** | **Red Tag  Number** | **Date**  **Affixed** | **Date**  **Removed** | **Significant Violation** |
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| **Abandoned UST Facility Name** | **CERS Tank ID** | **Number of  Abandoned** **USTs at Facility** | **Date Abandoned  USTs Reported to UPA** |
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| **Temporary Closure Facility Name** | **CERS Tank ID** | **Start Date of  Temporary Closure** | **Site Assessment Performed** **(Y/N)** |
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