



**MAILING ADDRESS:**  
 STATE WATER RESOURCES CONTROL BOARD  
 DIVISION OF FINANCIAL ASSISTANCE  
 UST CLEANUP FUND  
 P.O. BOX 944212  
 SACRAMENTO, CA 94244-2120

**PHYSICAL ADDRESS:**  
 STATE WATER RESOURCES CONTROL BOARD  
 DIVISION OF FINANCIAL ASSISTANCE  
 UST CLEANUP FUND  
 1001 I STREET  
 SACRAMENTO, CA 95814

## PERMIT WAIVER REQUEST FORM FOR CLAIMS FILED ON AND AFTER JANUARY 1, 1994

	CLAIM NO.:
CLAIMANT NAME:	
SITE ADDRESS:	

Claimants who were subject to the permit requirement but failed to comply, can request the State Water Resources Control Board (State Water Board) to waive the requirement as a condition for eligibility. For claims filed on and after January 1, 1994, the State Water Board may waive the permit requirement if the four requirements listed below have been met. **Please note: for claims that are filed on and after January 1, 1994, waivers are limited to permits required by January 1, 1990; a waiver may not be used to excuse permit non-compliance that occurred after January 1, 1990.** Where the State Water Board grants the waiver, the deductible (level of required financial responsibility) is twice the amount otherwise required. In this case, the above-named claimant will be responsible for the deductible amount (determined by USTCF staff) of eligible corrective action costs before Fund coverage begins.

I, \_\_\_\_\_, HEREBY REQUEST THE STATE WATER BOARD TO GRANT A PERMIT WAIVER. TO QUALIFY FOR THIS WAIVER, I AM SUBMITTING DOCUMENTATION SHOWING THAT THE FOLLOWING FOUR PERMIT WAIVER REQUIREMENTS HAVE BEEN MET:

1. The claimant was unaware of the permit requirement prior to January 1, 1990, and did not intend to avoid the permit requirement or the associated fees.

**DOCUMENTATION:** Provide a brief history of the UST(s) and an explanation as to why the claimant did not obtain UST permits when the claimant became subject to permitting requirements (when the claimant became the owner and/or operator of the USTs or when the local regulatory agency began issuing UST permits, whichever occurred later). Explain when and how the claimant became aware of the law requiring a permit to own or operate the UST(s). (Attach additional sheets as necessary.)

2. Prior to filing a claim, the claimant has complied with the financial responsibility requirements of Section 25299.31 of the Health & Safety Code (H&SC).

**DOCUMENTATION:** Attach a copy of the Certificate of Financial Responsibility that is on file with the local regulatory agency.

3. The claimant has obtained and paid for all currently required permits.

**DOCUMENTATION:** If you owned or operated the UST(s) at the time of submitting the claim application, **attach** a copy of the permit to own or operate the UST(s) or a copy of the application to the local agency for a permit indicating that you are diligently pursuing the acquisition of a permit. If the UST(s) were removed prior to submitting your claim application, **attach** evidence that the UST(s) were removed, and the local regulatory agency notified, and a copy of the removal permit.

4. The claimant has paid all current UST fees imposed by Section 25299.41 of the H&SC, and all prior fees due on and after January 1, 1991.

**DOCUMENTATION:** If any of the USTs owned or operated had product placed in them on or after January 1, 1991, **attach** the most recent copy of the UST Fee Return Form filed with the State Board of Equalization with proof of payment.

CLAIMANT SIGNATURE: \_\_\_\_\_

PRINT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_