A closure report shall be submitted to the County of Los Angeles Public Works, Environmental Programs Division, P.O. Box 1460, Alhambra, California 91802-1460, containing:

1. File number of facility and closure permit number.

2. Plot plan to scale showing locations of tanks, sampling points, buildings, adjacent streets, and north arrow.

3. Description of methods for obtaining, handling, and transporting samples.

4. Time and date samples were obtained.

5. Soil sampling certification (including but not limited to soils classification, boring logs, sample procedures, sample locations, initiating chain-of-custody, and groundwater location) for Underground Storage Tank closure shall be certified by a California registered geologist, a California certified engineering geologist, or a California registered civil engineer with sufficient experience in soils. The certification must clearly state that all work was performed under the supervision of the person signing.

6. Chain-of-custody documentation initiated by person obtaining sample through person at a California State Water Resources Control Board (SWRCB) certified environmental laboratory.

7. Disposal destination of tanks and evidence of legal disposal.

8. Analysis results by a SWRCB certified environmental laboratory submitted on laboratory letterhead showing analysis date, methods of extraction, and methods of analysis.

9. Documentation as to depth of groundwater at facility.

10. Manifests to document hazardous waste disposal of any removed soil and tank rinsate.

11. Evidence of legal disposal of soils designated as nonhazardous.

12. Any observations of site contamination.

13. Report to be signed by a California registered geologist, a California certified engineering geologist, or a California registered civil engineer with sufficient experience in soils.

14. Submit to the California Environmental Reporting System (CERS) the date the UST was permanently closed for all tanks removed or closed in-place.

Print Name ________________________________ Owner or Operator □ Contractor □

Signature ________________________________ Date ____________________________