

AFFIDAVIT OF WAIVER FOR PSTEAF REIMBURSEMENT



**KENTUCKY
DEPARTMENT
FOR
ENVIRONMENTAL
PROTECTION**

Mail completed form to:
**DIVISION OF WASTE MANAGEMENT
UNDERGROUND STORAGE TANK BRANCH
200 FAIR OAKS LANE, SECOND FLOOR
FRANKFORT, KENTUCKY 40601
(502) 564-5981
<http://waste.ky.gov/ust>**

FOR STATE USE ONLY

FACILITY OWNER AND/OR OPERATOR SIGNATURE

We, the undersigned facility owner and/or operator _____, hereby acknowledge that reimbursement from the Petroleum Storage Tank Environmental Assurance Fund will not be sought for the actions to be performed at the _____, AI # _____ facility for (check the appropriate box below):

- The purpose of meeting the requirements of 401 KAR Chapter 42 for the release reported on _____ (date); or
- The proposal submitted on _____ (date) by _____; or
- The written directive issued by the cabinet on _____ (date); or
- Other _____ (describe).

OWNER AND/OR OPERATOR

NOTARY INFORMATION

Subscribed and sworn to before me by _____ this the _____ day of _____, 20____.

NOTARY PUBLIC

My Commission Expires: _____.

"RETAIN A COPY OF THIS FORM FOR YOUR RECORDS"