

Facility Name: _____ PBS Number: _____

I, _____ (type or print name of Primary Facility Owner), hereby certify that I am qualified under the regulatory definition to be the owner for the above-named facility as indicated below (check one box):

- I am a general partner in a partnership.
- I am the owner of a sole proprietorship.
- I am an officer of the corporation.
My title is: _____
- I am a principal executive officer or ranking elected official of a municipality, state, federal or other public agency.
My office/title is: _____
My agency is: _____
- I perform policy or decision making functions similar to that of an officer of the corporation.
Explain: _____

Check box and list tanks if the Primary Facility Owner operates tanks at this facility.

- I am the operator at this facility and responsible for the following petroleum tanks at this facility applying for or subject to a certificate under these regulations:

<u>Tank ID</u>	<u>AST/UST</u>	<u>Capacity (gallons)</u>	<u>Product</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I hereby designate the below-named person as an authorized representative to act in my stead. I also certify that this individual is an additional owner responsible for the petroleum tanks listed below at this facility applying for or subject to a certificate under these regulations.

Name of Individual: _____
 Title: _____
 Business Entity Name: _____
 Mailing Address: _____

<u>Tank ID</u>	<u>AST/UST</u>	<u>Capacity (gallons)</u>	<u>Product</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I hereby certify under penalty of perjury that the information provided on this form is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.

 Signature of Primary Facility Owner _____
Date

 Signature of duly authorized representative designee _____
Date