

### AFFIDAVIT OF WAIVER FOR PSTEAF REIMBURSEMENT



**KENTUCKY  
DEPARTMENT  
FOR  
ENVIRONMENTAL  
PROTECTION**

*Mail completed form to:*  
**DIVISION OF WASTE MANAGEMENT  
UNDERGROUND STORAGE TANK BRANCH  
300 SOWER BLVD, 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"**