



Colorado Department of Labor and Employment
Division of Oil and Public Safety – Compliance Section
633 17th Street, Suite 500
Denver, CO 80202-3610

Phone: 303-318-8525
Email: cdle_oil_inspection@state.co.us
Web: www.colorado.gov/ops

Aboveground Storage Tank Temporary Closure Notification

Owners/operators shall notify the Division of Oil and Public Safety (OPS) in writing at least 10 days prior to placing an aboveground storage tank (AST) system in temporary closure, and at that same time submit records documenting the prior 12 months of monthly visual inspections, inventory control, ullage records, piping release detection records, and corrosion protection testing (if applicable) for tanks and piping. In lieu of submitting these records, the owner/operator may conduct a tightness test of the tanks and underground piping and complete a site assessment as required by OPS, and submit these results with the temporary closure notification. The closure notice and supporting documentation can be sent via email or by postal mail.

Temporarily closed tanks must be emptied of liquid, rendered vapor free and safeguarded against trespassing by means of locked gates, fences, etc. When an AST system is temporarily closed, owners/operators must continue the operation, maintenance, inspection and testing of corrosion protection. Release detection is not required during this time.

When an AST system is temporarily closed for 3 months or more, owners/operators must also comply with the following requirements:

- A. Leave vent lines open and functioning; and
- B. Cap and secure all pumps, manways, ancillary equipment and lines.

When an AST system is temporarily closed for more than 12 months, owners/operators must permanently close the AST system as required by OPS, or return the tank(s) back to service. At the discretion of OPS, a 12 month extension may be granted. To request an extension, owners/operators must complete and submit the Temporary Closure Extension form along with a recent site assessment.

Owners/operators shall notify OPS in writing no more than 30 days prior to placing an AST back in service, and at that same time submit corrosion protection records (if applicable) for the period of temporary closure, and documentation of passing tightness tests for the AST conducted within the past 30 calendar days. Passing line tightness test results for underground piping shall be obtained immediately upon introduction of fuel in the lines. Testing documentation should be submitted to OPS within 10 calendar days.

Retain closure records for at least three years. Records can be kept on site or transferred to the Division of Oil and Public Safety.

Please refer to Colorado's [Petroleum Storage Tank regulations](#) for more details on tank closure, site assessment, release reporting, release investigation, remediation and record keeping requirements.

To report a suspected or confirmed release discovered at temporary closure, call the Division of Oil and Public Safety Technical Assistance line at 303-318-8547.



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Notice of Intent to Place Aboveground Storage Tanks into Temporary Closure

(Revised 4/4/2019)

Owners/operators are required to submit records documenting the prior 12 months of release detection and corrosion protection testing (if applicable) for tanks and lines. In lieu of submitting these records, an owner/operator may conduct a precision tightness test on the tanks and lines and complete a site assessment as required by OPS, and submit these results with the temporary closure notification.

Complete this form and return it to the Division of Oil and Public Safety via email or postal mail at least 10 days, but no more than 30 days, before closure activities begin. Please contact us at 303-318-8525 if you have any questions.

Submit 12 months of Release Detection and Corrosion Protection (if applicable) records for tanks and lines.	<u>OR</u>	Submit a Precision Tightness Test on Tanks and underground piping and Site Assessment.
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Facility Information

Facility Name:	
Facility ID:	
Facility Address:	

Contact Information

Name:	
Company Name:	
Mailing Address:	
Phone Number:	
Email Address:	
Signature:	

Tank Information

Date tanks were emptied to less than 1 inch: (Documentation **required**, i.e. waste manifest, invoice, etc.)

Number of tanks being placed into temporary closure:

AST#	Date Tank Tested	OPS Tank ID #	Installation Date (year)	Tank Capacity (gallons)	Product Last Stored in Tank
1					
2					
3					

Purpose of Temporary Closure