



Colorado Department of Labor and Employment
 Division of Oil and Public Safety – Petroleum Program
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Change of Product Form Underground and Aboveground Storage Tanks

(Revised 9/17/2015)

Complete this form and submit it to OPS (Division of Oil and Public Safety) within 30 days prior to changing the product in USTs (underground storage tanks) or ASTs (aboveground storage tanks). If you have questions concerning the completion of this form, you may contact us at 303-318-8023.

Facility Information

OPS Facility ID#:		# of USTs:		# of ASTs:	
Facility Name:				Phone #:	
Facility Address:	Street:				
	City:	County:		ZIP:	

Owner/Operator Information

Owner/Operator Name:		Contact Name:			
Mailing Address:	Street:				
	City:	State:		ZIP:	
Office Phone #:			Cell Phone #:		
Email Address:					

Primary Contact Information

Contact Name:		Company Name:			
Mailing Address:	Street:				
	City:	State:		ZIP:	
Office Phone #:			Cell Phone #:		
Email Address:					

Change of Product Information

If the change of product involves Alternative/Renewable fuels, you will need to submit the [Alternative/Renewable Fuel Compatibility Form](#) along with this form.

Change of Product Date:

Tank #	Tank Capacity	Current Product or Alternative/Renewable Fuel	New Product or Alternative/Renewable Fuel
1			
2			
3			
4			
5			
6			

Owner/Operator Certification

I certify that I am familiar with the information listed above and it is true, accurate and complete.

Printed Name:		Date:	
Signature:			