Notice of Intent: UST Permanent Closure or Change-in-Service STATE USE ONLY Return completed form to: The DWM Regional Office located in the area where the facility is located. Also send a copy to the Central Office in Raleigh. SEE MAP ON THE BACK OF THIS FORM FOR THE CENTRAL AND REGIONAL OFFICE ADDRESSES. Date Received INSTRUCTIONS (READ THIS FIRST) Complete and return a UST-3 form at least thirty (30) days prior to closure or change-in-service activities. Completed UST closure or change-in-service site assessment reports, along with a copy of the UST-2A and/or 2B forms, should be submitted to the appropriate Division of Waste Management (DWM) Regional Office within thirty (30) days following closure activities. The UST-2 form should also be submitted to the Central Office in Raleigh so that the status of the tanks may be changed to permanently closed and your tank fee account can be closed out. Note: Tank fees may be due for unregistered tanks. UST closure and change-in-service site assessments must be completed in accordance with the latest version of the Guidelines for Site Checks, Tank Closure and Initial Response. The guidelines can be obtained at https://deg.nc.gov/about/divisions/waste-management/ust. Note: To close tanks in place you must obtain prior approval from the DWM Regional office located in the region where the facility is located. You must make sure that USTs removed from your property are disposed of properly. When choosing a closure contractor, ask where the tank(s) will be taken for disposal. Usually, USTs are cleaned and cut up for scrap metal. This is dangerous work and must be performed by a qualified company. Tanks disposed of illegally in fields or other dumpsites can leak petroleum products and sludge into the environment. If your tanks are disposed of improperly, you could be held responsible for the cleanup of any environmental damage that occurs. I. OWNERSHIP OF TANKS II. LOCATION Owner Name (Corporation, Individual, Public Agency, or Other Entity) Facility Name or Company Family Building Company, LLC 1655 Bunnlevel Erwin Road Street Address Facility ID # (If known) 1016 Mockingbird Drive None City County Street Address Raleigh Wake 1655 Bunnlevel Erwin Road State Zip Code City County Zip Code NC 27615 Bunnlevel Harnett 28323 Phone Number Email Phone Number 931-269-9471 john@familybuildingco.com None III. CONTACT PERSONNEL Name: Company Name: Phone Number: Thomas Will East Coast Environmental PA 91977206 Geologist IV. TANK REMOVAL, CLOSURE IN PLACE, CHANGE-IN SERVICE 1. Contact local fire marshal. Provide a sketch locating piping, tanks and a P.E. or L.G., with all closure site assessment soil sampling locations. reports bearing the signature and seal of the 2. Plan entire closure event. P.E. or L.G. If a release has not occurred, the Submit a closure report in the format of UST-3. Conduct Site Soil Assessment. supervision, signature or seal of a P.E. or L.G. 12 (including the form UST-2) within thirty is not required. 4. If removing tanks or closing in place, refer to (30) days following the site investigation. API Publication 2015 Cleaning Petroleum Keep closure records for three (3) years. If a release from the tanks has occurred, the Storage Tanks and 1604 Removal and site assessment portion of the tank closure Disposal of Used Underground Petroleum must be conducted under the supervision of Storage Tanks. WORK TO BE PERFORMED BY Contractor Name: Contractor Company Name: Family Building Company LLC Family Building Company LLC Phone No: State: Zip Code: 1016 Mockingbird Drive Raleigh NC 9312699471 27615 Primary Consultant Name: Primary Consultant Company Name: Consultant Phone No: Thomas Will East Coast Environmental PA 919-772-0268 VI. TANKS SCHEDULED FOR CLOSURE OR CHANGE-IN-SERVICE Proposed Activity Change-In-Service Closure Tank ID No. Size in Gallons Abandonment in Place 1 Last Contents Removal New Contents Stored 1000 Gasoline, Gas Mix 1 2 1000 Gasoline, Gas Mix X None None * Prior written approval to abandon a tank in place must be received from a DWM Regional Office VII. OWNER OR OWNER'S AUTHORIZED REPRESENTATIVE Has a release from a UST system occurred at this location? Yes No Unknown I understand that I can be held responsible for environmental damage resulting from the improper disposal of my USTs. Print name and official title: Thomas Will Geologist Signature Date Signed SCHEDULED REMOVAL DATE Notify your DWM Regional Office

7-18-25

7-21-25

48 hours before this date if scheduled removal date changes