North Carolina Department of Environment and Natural Resources Division of Waste Management

TRANSFER OF OWNERSHIP CONSENT FORM

For Dry-Cleaning Solvent Cleanup Act (DSCA) Sites

The following is a request to transfer the ownership of the DSCA certified facility or the property where the certified facility or abandoned site is located. Please submit this form to the DSCA Program, 1646 Mail Service Center, Raleigh, NC 27699-1646. *Please complete all blanks. If an item is not applicable, indicate with NA. Please type or print clearly.*

Please note that there must be an active petitioner in order for the facility to remain certified in the DSCA Program.

Date:	DSCA ID No. (if known):
Action Requested:	☐ Change property ownership ☐ Change business ownership
Facility Name/Proper	ty Address:
Current Owner/Poin	t of Contact:
Company Name:	
Mailing Address:	
City, State, Zip:	
Contact Person:	
Phone Number:	Email:
-	oetitioner in the DSCA Program?
New Owner/Point of O	Contact:
Company Name:	
Mailing Address: City, State, Zip:	
Contact Person:	
Phone Number:	Email:
Will the new owner per	tition for entry into the DSCA Program?
If yes, please submit the DSCA Petition for Certification which can be found at http://portal.ncdenr.org/web/wm/dsca	
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