

#### Placer County Health and Human Services Department

**Jeffrey S. Brown, M.P.H., M.S.W.**Department Director

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## Permit Application For: UNDERGROUND STORAGE TANK

☐ NEW CONSTR	UCTION   MODIFIC	CATION REPAIR
Owner	Address	Phone #
Facility Name	Address	Phone #
Contractor	Address	Phone #
Brief Description of Work Pro	oposed:	
(UST) systems, which include	des tanks, piping, secon	epair of underground storage tank dary containment components, and same), shall meet the following
type and a Hazardou: Class A Gen C-10 Electric C-36 Plumbii	s Substance Removal Ce eral Engineering al Contractor ng Contractor Limited Specialty Service	
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- ❖ Be trained and certified by the manufacturer of the tank(s), piping and monitoring equipment.
- ❖ Be re-certified by the manufacturer by completion of a manufacturer's refresher course. This certification shall be renewed at the time interval recommended by the manufacturer, or every 36 months, whichever is shorter.

## PLACER COUNTY UNDERGROUND STORAGE TANK NEW CONSTRUCTION/MODIFICATION/REPAIR PERMIT APPLICATION

# The completed application must include the following: (Incomplete applications will not be reviewed)

☐ 1.	A certified copy of worker's compensation insurance.				
<u> </u>	A detailed, written summary of the project, including a timeline.				
☐ 3.	A complete list (including manufacturer's name, specific model #, and U.L. or equivalent listing information) of all equipment proposed including the following:				
	<ul> <li>Tank(s)</li> <li>Tank trim</li> <li>Overfill Prevention</li> <li>Overspill Containment</li> <li>Tank Probes</li> <li>Tank Annular Space Monitoring Sensor</li> <li>Turbine/Suction Pump</li> <li>Psecondary Product Piping</li> <li>Vent and Vapor Piping</li> <li>Piping Sumps</li> <li>Piping Sump Monitoring Sensors</li> <li>Sump Fittings</li> <li>Line Leak Detector(s)</li> <li>Monitoring Console</li> <li>Under Dispenser Containment (UDC) Sump</li> <li>UDC Monitoring Equipment</li> </ul>				
☐ 4.	Detailed plot plan showing any and all existing structures, tanks, piping and utility fixtures.				
<u> </u>	A complete set of scaled construction plans stamped and signed by a professional engineer. These plans must include site layout; and tank, piping and monitoring system installation design specifications.				
6.	Copies of current installation training certificates issued by the manufacturer for:  Tank(s)  Piping  Monitoring Equipment				
☐ 7.	A tank buoyancy, anchoring and ballasting design prepared by a professional engineer.				
8.	Completed California State Water Resources Control Board (SWRCB) forms "Underground Storage Tank-Facility" and "Underground Storage Tank-Tank" forms (formerly forms A and B).				
9.	Completed SWRCB "Certification of Financial Responsibility" form.				
<u> </u>	Completed fee disclosure form.				

#### PLACER COUNTY UNDERGROUND STORAGE TANK NEW CONSTRUCTION/MODIFICATION/REPAIR PERMIT APPLICATION

#### Please be Advised:

- ❖ All work must conform to the design, construction and monitoring requirements of *Article 3* of the California Underground Storage Tank Regulations, Title 23, California Code of Regulations.
- All applicable encroachment, building, air pollution control district, fire department and other agency requirements, permits and approvals must be obtained as needed. In addition, no work is to be done until a permit is issued by this office.
- All necessary and appropriate agency approvals, i.e., building department and fire authority, must be obtained prior to introducing fuel into the tank system(s) for any purpose including tightness testing.
- Compliance with the *Uniform Fire Code* and related requirements is the responsibility of the owner, and the contractor.
- All underground storage tanks subject to floatation shall be anchored using methods specified by the manufacturer or, if none exists, shall be anchored according to the best engineering practice.
- Plan revisions/re-submittals must be clearly designated as such (e.g. cloud and date changes).
- This office does <u>not</u> review or approve site-specific health and safety plans for adequacy, accuracy, or completeness. Compliance with all applicable worker health and safety regulations, including implementation of the site safety plan, is the responsibility of the owner and contractor.
- This application will be reviewed to assure that the intended activity meets the requirements of Chapter 6.7 of the California Health and Safety Code and Chapter 8 of the Placer County Code. Compliance with any other requirements or codes is not implied with the review of the application and any subsequent issuance of a permit.

**Note:** If work is to be done which involves existing tanks or lines it is **strongly** recommended that a contingency plan be developed and submitted with the project plans to deal with the possibility that contamination may be encountered and to minimize construction delays. The contingency plan must be prepared by a qualified consultant.

## PLACER COUNTY UNDERGROUND STORAGE TANK NEW CONSTRUCTION/MODIFICATION/REPAIR PERMIT APPLICATION

#### **LIABILITY FOR DAMAGES:**

The applicant/permittee shall defend, indemnify, and hold harmless Placer County, and its agents, officers, and employees, from all claims, liability, damages, costs, lawsuits, and judgments for property damage, for personal injury, for construction costs or claims which may arise out of or be alleged to relate to applicant's/permittee's work performed under a permit, excepting for any actual damages which may be proven to have arisen solely out of the active negligence of the County. The applicant's/permittee's obligations hereunder shall include the defense and indemnification of Placer County from any claim, liability, damages, costs, lawsuits, or judgments as asserted by any third party, expressly including any party under contract with applicant/permittee to perform any of the work under this application/permit.

The undersigned have read the complete application package and acknowledge a agree to the terms of the foregoing requirements and statements.			
Contractor's Signature	DATE	CSLB License #	
Owner's Signature	DATE		
	For Agency Use Only		

Receipt #

T:\HHS\ENV\AA Haz Mat SW Team\HAZMATFORMS\UST

Fees Received

Ck/Cash Date