



Mendocino County Health and Human Services Agency
"Healthy People, Healthy Communities"
Environmental Health



UKIAH OFFICE
 860 N. Bush St
 Ukiah CA 95482
 P: (707) 234-6625 F: (707) 463-4038

DATE REC'D:	_____
REC'D BY:	_____
FEE:	_____
PAYMENT #:	_____
PERMIT #:	_____

**PERMIT APPLICATION TO CONSTRUCT, MODIFY, OR TEST
 AN UNDERGROUND STORAGE TANK SYSTEM**

Check all items that apply:

- | | | |
|---|--|--|
| <input type="checkbox"/> New Tank and/or Piping | <input type="checkbox"/> Tank Lining | <input type="checkbox"/> Tank Relining |
| <input type="checkbox"/> Overfill Protection | <input type="checkbox"/> Spill Containment | <input type="checkbox"/> Striker Plate |
| <input type="checkbox"/> Recertification Inspection (Structural & Lining – 10 year or 5 year) | <input type="checkbox"/> System Modification | <input type="checkbox"/> System/component Repair |
| <input type="checkbox"/> Dispenser Pan Containment | <input type="checkbox"/> Monitoring System Upgrade | <input type="checkbox"/> Cold Start |
| | <input type="checkbox"/> Corrosion/Cathodic System | |

Number of Tank Systems or Components to be Constructed, Modified, or Tested _____

SITE INFORMATION:

Business Name: _____

Site Address: _____ City: _____ Zip: _____

OWNER INFORMATION:

Name: _____

Mailing Address: _____ City: _____ Zip: _____

Phone: _____ Contact: _____

OPERATOR INFORMATION:

Name: _____

Mailing Address: _____ City: _____ Zip: _____

Phone: _____ Contact: _____

CONTRACTOR INFORMATION:

Name: _____ E-Mail Address: _____

Mailing Address: _____ City: _____ Zip: _____

Phone: _____ Contact: _____

State Contractor License Number: _____ Type: _____

ICC License Number: _____

The following items must be submitted with this application:

- 1. PLANS**
Attach two (2) sets of full-sized scaled plans and one reduced set of plans (8 ½" x 11" or 11" x 17") showing:
 - ◆ Location of all tanks, piping, secondary containment, monitoring wells and other improvements
 - ◆ Property lines, buildings, adjacent streets and north arrow
 - ◆ **Equipment list** (*quantity, manufacturer, model number, size, and description*)
 - ◆ Label equipment as new or existing
 - ◆ Location of all underground utilities
 - 2. CUT SHEETS** of all equipment to be installed with Independent Testing Organization / Third Party Approval
 - 3. INSTALLATION INSTRUCTIONS** and Checklist for the tanks and piping.
 - 4. ATTACH** copy of current Business License (City or County).
- At final inspection provide:**
- ◆ 'As-Built' site plan (8 ½" x 11")
 - ◆ Written Monitoring Plan (WMP)
 - ◆ Containment Response Plan (CRP)

AGREEMENT

I understand Mendocino County Air Quality Management District, the Planning and Building Department, the Coastal Commission, the North Coast Regional Water Quality Control Board, and the local fire department may have their own procedures and permitting requirements for which I am responsible.

I agree to perform all work in accordance with the "Permit Terms and Conditions" and in compliance with the *California Underground Storage Tank Regulations*, Title 23, Division 3, Chapter 16 of the *California Code of Regulations* as revised and the *Health and Safety Code*, Chapter 6.7 as amended.

Signature of Owner or Agent

Date

Fee and Payment Information:

Please see enclosed fee schedule and remit appropriate fee made payable to MCEH to:

County of Mendocino
Environmental Health
860 N. Bush St
Ukiah, CA 95482