

UST application for extension of temporary closure

Underground Storage Tanks (UST) Program

Doc Type: Conditional Closure

Minn. R. 7150.0400 requires regulated underground storage tanks that are taken out of service to be permanently closed (i.e., removed or closed in place) within one year, unless the owner has been granted an extension of temporary closure. Tanks out of service for five years or longer are not eligible for temporary closure and must be permanently closed. Use this form to apply for an extension of temporary closure. Keep a copy for your records. Incomplete applications will be returned.

Submittal: To submit this form, open the form using Internet Explorer Web browser or Adobe Acrobat Reader, complete and save the form to your computer, and send to the Minnesota Pollution Control Agency (MPCA) by using the submit button at the end of the form, or attach the form to an email message, using "Application for extension" as the subject line to undergroundtanks.pca@state.mn.us.

MPCA Use Only	
Site #:	
County:	
Date rec'd:	
Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No	Date

A. General information

Site information

Site name: _____ Site # (if known): _____
 Address: _____
 City: _____ State: MN Zip code: _____ County: _____
 Contact name: _____ Phone: _____

Tank owner information

Name: _____
 Address: _____
 City: _____ State: _____ Zip code: _____
 Contact name: _____ Phone: _____

Tank/Piping information (See Guidance on page 4)

1. Tank number				
2. Tank capacity	Gallons:	Gallons:	Gallons:	Gallons:
3. Substance last stored				
4. Installation date (if known)				
5. Date taken out of service				
6. Tank type				
7. Tank corrosion protection				
8. Primary method of tank release detection				
9. Piping type				
10. Piping corrosion protection				
11. Primary method of piping release detection				

B. Extension of temporary closure

Answer the questions below and submit the requested records along with this application. Failure to answer **all** applicable questions and/or submit required documentation as indicated below will result in the rejection of this application. Records submitted with this application may be copies of original documents. Upon review of the application, the MPCA may request additional documentation to determine tank compliance at time of temporary closure.

The MPCA will review this application and submitted documents and the owner of the tank system will be notified of the decision and/or further actions required.

General requirements for temporary closure

By checking "yes" you have verified that these items have been completed.

1. Has a signed "Notification of Installation or Change in Status" form been sent in to the MPCA placing the tanks into temporary closure? If No, complete and submit a signed "Notification of Installation or Change in Status" form with this application.	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Are the vent lines currently open and functioning properly?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Have all product lines, pumps, fill caps, and other passage ways to the tank system been capped and locked?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Are the tanks empty? (to be considered empty, no more than one inch of product, residue, sludge, and/or water can remain in the tank(s))	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Is spill containment installed at the fuel delivery point and functioning properly?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Is an overfill prevention device installed and functioning properly?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Corrosion protection requirements for temporary closure

Temporarily closed tank systems with steel tanks and/or piping must continue routine operation and maintenance of corrosion protection according to Minn. R. ch. 7150.0215. For non-corrosive tanks and piping (i.e., fiberglass, composite, flexible, etc.) check N/A (Not Applicable).

Sacrificial anode systems only	
1. Has a cathodic protection test been conducted every 3 years during active use and temporarily closed status? If Yes, submit the most recent cathodic protection test results with this application.	Tanks - <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Piping - <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Impressed current systems only	
1. Has the power for the rectifier remained "on" during active use and temporarily closed status? If Yes, submit the last year of 60 day rectifier readings with this application.	Tanks - <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Piping - <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
2. Has a cathodic protection test been conducted annually? If Yes, submit the most recent cathodic protection test results with this application.	Tanks - <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A Piping - <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Internally lined tanks only	
1. Has an internally lining inspection been conducted on the tanks within 10 years of installation and every 5 years thereafter? If Yes, submit the most recent internal lining inspection report with this application.	Tanks - <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

Spill/Leak information

1. Has a release/spill of over **five gallons** or an unknown amount, ever occurred at the tank site? Yes No
 If Yes, was it reported to the Minnesota Duty Officer? Yes No
If Yes, briefly describe the nature of the release and actions taken. Include approximate dates and details or include the spill/leak number you were given. Attach additional sheets if necessary. (Maximum 750 characters approximately)

If the above described release was not reported to the Minnesota Duty Officer, explain why: (Maximum 750 characters approximately)

2. Is this site an **active leak site** that is currently working with the MPCA Petroleum Remediation Program? Yes No
 If yes, give leak or spill number you were given: _____

Provide a brief description of why the tank system is temporarily closed and why you are applying for an extension of temporary closure: (Maximum 750 characters approximately)

Certification - Tank owner signature

I certify that the information submitted is accurate and complete to the best of my knowledge; I understand temporary and/or permanent tank closure requirements according to Minn. R ch. 7150.0400 to 7150.0430; I understand that if any of the information above is falsified or inaccurate, the application may be denied or the approval may be revoked.

By typing my name below, I certify the above statements to be true and correct, to the best of my knowledge, and that this information can be used for the purpose of processing this form.

I agree **Note: This needs to be checked before the form will submit.**

Owner or authorized representative

Name: _____ Title: _____
(This document has been electronically signed.) Date (mm/dd/yyyy): _____

Tank/Piping information

A. 1. Tank number:

Enter a unique tank ID number for each of the tanks on the property

A. 3. Substance Last Stored:

Choose from drop-down menu or list below.

Gasoline, Aviation
Gasoline, E10
Gasoline, E20
Gasoline, Non-oxygenated
Diesel, B2/5
Diesel, Petroleum
Biodiesel, B100
Fuel Oil #2 (light)
Fuel Oil #6 (heavy)
Kerosene
Mineral Spirits
Jet Fuel
Mineral Oil
Lubricating Oil
Used Oil
Petroleum, Other (specify)
Ethanol, E100
Ethanol, E95 (denatured)
Ethanol, E85
Chemical, Antifreeze
Chemical, Acidic (specify)
Chemical, Caustic (specify)
Chemical, Other (specify)
Other Substance (specify)

A. 6. Tank type:

*Choose from drop-down menu or list below.
If "Other" is chosen, describe tank type in Box 2.*

Steel, Single Walled
Steel, Double Walled
STIP3, Single Walled
STIP3, Double Walled
Jacketed Steel, Single Walled
Jacketed Steel, Double Walled
Fiberglass, Single Walled
Fiberglass, Double Walled
Other (specify)

A. 7. Tank corrosion protection:

Choose from drop-down menu or list below.

Sacrificial Anode
Impressed Current
Internal Lining
None
Not needed (*use if Tank Type is any Jacketed Steel type or any Fiberglass type*)

A. 8. Primary method of tank release detection:

Choose from drop-down menu or list below.

Automatic tank gauging (ATG)
Inventory control
Statistical inventory control (SIR)
Manual tank gauging
Interstitial monitoring

A. 9. Piping type:

Choose from drop-down menu or list below.

Steel, Single Walled (*includes coated, wrapped, and galvanized*)
Steel, Double Walled
Jacketed Steel, Single Walled
Jacketed Steel, Double Walled
Fiberglass, Single Walled
Fiberglass, Double Walled
Copper
Flexible Nonmetallic, Single Walled
Flexible Nonmetallic, Double Walled
Other (specify)
None (*use if tank has no piping*)

A. 10. Piping corrosion protection:

Choose from drop-down menu or list below.

Sacrificial Anode
Impressed Current
None
Not needed (*use if Piping Type is any Jacketed Steel type, any Fiberglass type, or any Flexible Nonmetallic type*)

A. 11. Primary method of piping release detection:

Choose from drop-down menu or list below.

Automatic line-leak detector
3-year tightness testing (*use if other suction dispensing*)
Interstitial monitoring
Not needed (*use if safe suction dispensing*)