

UNIFIED PROGRAM CONSOLIDATED FORM UNDERGROUND STORAGE TANK OPERATING PERMIT APPLICATION – TANK INFORMATION (One form per UST)			
TYPE OF ACTION (Check one item only. For an UST permanent closure or removal, complete only this section and Sections I, II, III, IV, and IX below)			430
<input type="checkbox"/> 1. NEW PERMIT <input type="checkbox"/> 6. TEMPORARY UST CLOSURE <input checked="" type="checkbox"/> 3. RENEWAL PERMIT <input type="checkbox"/> 7. UST PERMANENT CLOSURE ON SITE <input type="checkbox"/> 5. CHANGE OF INFORMATION <input type="checkbox"/> 8. UST REMOVAL			
DATE UST PERMANENTLY CLOSED:		DATE EXISTING UST DISCOVERED:	
I. FACILITY INFORMATION			
FACILITY ID # (Agency Use Only)			
BUSINESS NAME (Same as FACILITY NAME or DBA-Doing Business As)			
BUSINESS SITE ADDRESS COUNTY OF FREMONT - HAMILTON		CITY FREMONT	
II. TANK DESCRIPTION			
TANK ID #	TANK MANUFACTURER	TANK CONFIGURATION: THIS TANK IS	
1	MODERN	<input checked="" type="checkbox"/> 1. A STAND-ALONE TANK <input type="checkbox"/> 2. ONE IN A COMPARTMENTED UNIT Complete one page for each compartment in the unit.	
DATE UST SYSTEM INSTALLED 1997	TANK CAPACITY IN GALLONS 20,000	NUMBER OF COMPARTMENTS IN THE UNIT 1	
III. TANK USE AND CONTENTS			
TANK USE	<input checked="" type="checkbox"/> 1a. MOTOR VEHICLE FUELING <input type="checkbox"/> 3. CHEMICAL PRODUCT STORAGE <input type="checkbox"/> 6. OTHER GENERATOR FUEL <input type="checkbox"/> 1b. MARINA FUELING <input type="checkbox"/> 4. HAZARDOUS WASTE (Includes Used Oil) <input type="checkbox"/> 95. UNKNOWN <input type="checkbox"/> 1c. AVIATION FUELING <input type="checkbox"/> 5. EMERGENCY GENERATOR FUEL [HSC §25281.5(c)] <input type="checkbox"/> 99. OTHER (Specify):		
CONTENTS	PETROLEUM: <input checked="" type="checkbox"/> 1a. REGULAR UNLEADED <input type="checkbox"/> 1c. MIDGRADE UNLEADED <input type="checkbox"/> 3. DIESEL <input type="checkbox"/> 5. JET FUEL <input type="checkbox"/> 8. PETROLEUM BLEND FUEL <input type="checkbox"/> 9. OTHER PETROLEUM (Specify): NON-PETROLEUM: <input type="checkbox"/> 7. USED OIL <input type="checkbox"/> 10. ETHANOL <input type="checkbox"/> 11. OTHER NON-PETROLEUM (Specify):		
IV. TANK CONSTRUCTION			
TYPE OF TANK	<input type="checkbox"/> 1. SINGLE WALL <input checked="" type="checkbox"/> 2. DOUBLE WALL <input type="checkbox"/> 95. UNKNOWN <input type="checkbox"/> 1. STEEL <input type="checkbox"/> 3. FIBERGLASS <input type="checkbox"/> 6. INTERNAL BLADDER <input type="checkbox"/> 7. STEEL + INTERNAL LINING <input type="checkbox"/> 95. UNKNOWN <input type="checkbox"/> 99. OTHER (Specify):		
PRIMARY CONTAINMENT	<input type="checkbox"/> 1. STEEL <input checked="" type="checkbox"/> 3. FIBERGLASS <input type="checkbox"/> 6. EXTERIOR MEMBRANE LINER <input type="checkbox"/> 7. JACKETED <input type="checkbox"/> 90. NONE <input type="checkbox"/> 95. UNKNOWN <input type="checkbox"/> 99. OTHER (Specify):		
SECONDARY CONTAINMENT	<input type="checkbox"/> 1. STEEL <input checked="" type="checkbox"/> 3. FIBERGLASS <input type="checkbox"/> 6. EXTERIOR MEMBRANE LINER <input type="checkbox"/> 7. JACKETED <input type="checkbox"/> 90. NONE <input type="checkbox"/> 95. UNKNOWN <input type="checkbox"/> 99. OTHER (Specify):		
OVERFILL PREVENTION	<input checked="" type="checkbox"/> 1. AUDIBLE & VISUAL ALARMS <input type="checkbox"/> 2. BALL FLOAT <input type="checkbox"/> 3. FILL TUBE SHUT-OFF VALVE <input type="checkbox"/> 4. TANK MEETS REQUIREMENTS FOR EXEMPTION FROM OVERFILL PREVENTION EQUIPMENT		
V. PRODUCT / WASTE PIPING CONSTRUCTION			
PIPING CONSTRUCTION	<input type="checkbox"/> 1. SINGLE-WALLED <input checked="" type="checkbox"/> 2. DOUBLE-WALLED <input type="checkbox"/> 99. OTHER		
SYSTEM TYPE	<input type="checkbox"/> 1. PRESSURE <input type="checkbox"/> 2. GRAVITY <input type="checkbox"/> 3. CONVENTIONAL SUCTION <input type="checkbox"/> 4. SAFE SUCTION [23 CCR §2636(a)(3)]		
PRIMARY CONTAINMENT	<input type="checkbox"/> 1. STEEL <input checked="" type="checkbox"/> 4. FIBERGLASS <input type="checkbox"/> 8. FLEXIBLE <input type="checkbox"/> 10. RIGID PLASTIC <input type="checkbox"/> 90. NONE <input type="checkbox"/> 95. UNKNOWN <input type="checkbox"/> 99. OTHER (Specify):		
SECONDARY CONTAINMENT	<input type="checkbox"/> 1. STEEL <input checked="" type="checkbox"/> 4. FIBERGLASS <input type="checkbox"/> 8. FLEXIBLE <input type="checkbox"/> 10. RIGID PLASTIC <input type="checkbox"/> 90. NONE <input type="checkbox"/> 95. UNKNOWN <input type="checkbox"/> 99. OTHER (Specify):		
PIPING/TURBINE CONTAINMENT SUMP TYPE	<input type="checkbox"/> 1. SINGLE WALL <input type="checkbox"/> 2. DOUBLE WALL <input type="checkbox"/> 90. NONE		
VI. VENT, VAPOR RECOVERY (VR) AND RISER / FILL PIPE PIPING CONSTRUCTION			
VENT PRIMARY CONTAINMENT	<input type="checkbox"/> 1. STEEL <input checked="" type="checkbox"/> 4. FIBERGLASS <input type="checkbox"/> 10. RIGID PLASTIC <input type="checkbox"/> 90. NONE <input type="checkbox"/> 99. OTHER (Specify):		
VENT SECONDARY CONTAINMENT	<input type="checkbox"/> 1. STEEL <input checked="" type="checkbox"/> 4. FIBERGLASS <input type="checkbox"/> 10. RIGID PLASTIC <input type="checkbox"/> 90. NONE <input type="checkbox"/> 99. OTHER (Specify):		
VR PRIMARY CONTAINMENT	<input type="checkbox"/> 1. STEEL <input checked="" type="checkbox"/> 4. FIBERGLASS <input type="checkbox"/> 10. RIGID PLASTIC <input type="checkbox"/> 90. NONE <input type="checkbox"/> 99. OTHER (Specify):		
VR SECONDARY CONTAINMENT	<input type="checkbox"/> 1. STEEL <input checked="" type="checkbox"/> 4. FIBERGLASS <input type="checkbox"/> 10. RIGID PLASTIC <input type="checkbox"/> 90. NONE <input type="checkbox"/> 99. OTHER (Specify):		
VENT PIPING TRANSITION SUMP TYPE	<input type="checkbox"/> 1. SINGLE WALL <input checked="" type="checkbox"/> 2. DOUBLE WALL <input type="checkbox"/> 90. NONE		
RISER PRIMARY CONTAINMENT	<input type="checkbox"/> 1. STEEL <input checked="" type="checkbox"/> 4. FIBERGLASS <input type="checkbox"/> 10. RIGID PLASTIC <input type="checkbox"/> 90. NONE <input type="checkbox"/> 99. OTHER (Specify):		
RISER SECONDARY CONTAINMENT	<input type="checkbox"/> 1. STEEL <input checked="" type="checkbox"/> 4. FIBERGLASS <input type="checkbox"/> 10. RIGID PLASTIC <input type="checkbox"/> 90. NONE <input type="checkbox"/> 99. OTHER (Specify):		
FILL COMPONENTS INSTALLED	<input checked="" type="checkbox"/> 1. SPILL BUCKET <input checked="" type="checkbox"/> 3. STRIKER PLATE/BOTTOM PROTECTOR <input type="checkbox"/> 4. CONTAINMENT SUMP		
VII. UNDER DISPENSER CONTAINMENT (UDC)			
CONSTRUCTION TYPE	<input checked="" type="checkbox"/> 1. SINGLE WALL <input type="checkbox"/> 2. DOUBLE WALL <input type="checkbox"/> 3. NO DISPENSERS <input type="checkbox"/> 90. NONE		
CONSTRUCTION MATERIAL	<input type="checkbox"/> 1. STEEL <input checked="" type="checkbox"/> 4. FIBERGLASS <input type="checkbox"/> 10. RIGID PLASTIC <input type="checkbox"/> 99. OTHER (Specify):		
VIII. CORROSION PROTECTION			
STEEL COMPONENT PROTECTION	<input type="checkbox"/> 2. SACRIFICIAL ANODE(S) <input type="checkbox"/> 4. IMPRESSED CURRENT <input type="checkbox"/> 6. ISOLATION		
IX. APPLICANT SIGNATURE			
CERTIFICATION: I certify that this UST system is compatible with the hazardous substance stored and that the information provided herein is true, accurate, and in full compliance with legal requirements.			
APPLICANT SIGNATURE	DATE		470
APPLICANT NAME (print)	APPLICANT TITLE		472
LARRY CAITHEN	FUEL SITE COMPLIANCE SPECIALIST		