

Date: _____

Permit No. _____

Building Inspections Division



UNDERGROUND STORAGE TANK REMOVAL PERMIT APPLICATION

Business Name: _____	Phone: _____
Site Address: _____	Suite: _____
Property Owner Name: _____	Phone: _____
Applicant Name: _____	Owner ___ Contractor ___ Other ___
Contractor Business Name: _____	Phone: _____
Address: _____	Suite: _____
City: _____ State _____	Zip Code: _____
License No: _____	Expiration: _____

Description of work: _____

Proposed date to start work: _____

Tank(s):	Tank #1	Tank #2	Tank #3	Tank #4
Capacity:	_____	_____	_____	_____
Product:	_____	_____	_____	_____
Age of Tank:	_____	_____	_____	_____

Describe vapor removal method: _____

Name of environmental company used for soil testing: _____

Disposal site for tank(s): _____

Disposal site for sludge/product: _____

Disposal site for contaminated product: _____

Application Submittal Requirements:

1. Provide a sketch showing location of tank(s), piping and utilities.
2. Provide documentation of MNPCA notification.
3. Provide documentation of MNPCA certification of company and supervisor.

Tank Removal Inspections:

1. Pre-inspection of site prior to approval.
2. Tank(s) inspection before removal from site.
3. Open pit inspected before refilling.

NOTE: Tanks shall be removed from site as soon as possible, no longer than 24 hours after removal from the ground. Tanks must remain plugged after vapor removal.

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Fee:

Flat Permit Fee: \$150.00 per tank

\$ _____

Make check payable to *City of Forest Lake*

I hereby apply for this permit and I acknowledge that the information above is complete and accurate; that the work will be done in accordance with the ordinances of the City of Forest Lake, the Minnesota State Fire Code, NFPA standards, and the Pollution Control Agency rules; that I understand this is not a permit but an application for a permit and work is not to start without a permit; that the work will be in accordance with the approved plans, specifications and codes.

It is the responsibility of the applicant to call the Forest Lake Building Inspections Division at 651-464-4349 to schedule an inspection.

All information may be submitted electronically to: flinspections@ci.forest-lake.mn.us

Applicants Signature: _____ Date: _____

Office Use:

Required Inspections: Site

Permit Approved By: _____ Date: _____ Entered: _____ Issued: _____