



# Mariposa County Environmental Health



Public Health  
Prevent. Promote. Protect.

5100 Bullion Street  
Post Office Box 5  
Mariposa, California 95338  
(209) 966-2220 FAX (209) 966-8248

## APPLICATION FOR CLOSURE OF UNDERGROUND STORAGE TANKS

Application is for: Tank Removal \_\_\_\_\_ Abandonment in Place \_\_\_\_\_

**NOTE:** A fee of \$509.75 *per tank* is assessed and must accompany this application.

Facility Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Facility Address: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Contractor Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Contractor's License #: \_\_\_\_\_

Phone #: \_\_\_\_\_ Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

State Certified Laboratory providing sample analysis: \_\_\_\_\_

### TANK INFORMATION

Tanks	1.	2.	3.	4.	5.
Capacity (Gal)					
Former Contents					
<b>Piping (check box)</b>					
Pressurized					
Suction					
Gravity					

If tanks contained a flammable liquid, how will the tanks be inerted (i.e. dry ice) or purged (i.e. CO<sup>2</sup> or Nitrogen gas?) \_\_\_\_\_

Where will the tank(s) be transported for disposal and who will provide for their transportation? If tanks are not recycled, they must be transported via a hazardous waste manifest by a registered hauler. Documentation of final disposal or recycling must be provided to MCDEH within 30 days.

How will the disposal of tank sludge, waste product, and/or rinseate be conducted and who will provide this service? If a manifest is generated, a copy must be forwarded to MCDEH within 30 days.

How will soil and/or groundwater samples be collected from the excavation (i.e. hand-auger, backhoe?) \_\_\_\_\_

---

Will traffic control be necessary, and if so, how will it be controlled?

---

How will the excavation be secured if left open overnight? We recommend contacting USA Alert for underground utility information within the working area.

---

**Provide a drawing of the facility below. The following information must be provided:**

1. Location of the tanks, piping, dispensers, and vents. Include lengths and dimensions.
2. Proposed sampling locations and indicate those locations with an **X**.
3. Identify roads, buildings, and/or other pertinent information such as utility lines.

<u>North</u> ↑	SITE MAP

Owner/Contractor Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**FOR OFFICE USE ONLY. PLEASE DO NOT WRITE IN THIS SECTION**

\_\_\_ Authority to abandon is denied for the reason(s) listed below:

\_\_\_ Authority to abandon is approved with the following conditions:

---

---

---

Fire Department notified by: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_