

DRAFT ALABAMA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT NOTICE OF PROPOSED UST NEW INSTALLATION OR UPGRADE

(Use a separate form for each separate place of operation)

Date of this Notice: _____

If you have any questions on how to fill out this form or if you are not sure whether or not the new installation will be located within a Well Head Protection Area, please call the Groundwater Branch of ADEM at 334/270-5655.

PART I. GENERAL INFORMATION

Facility I. D. #: _____ <small>(indicate as unregistered if new place of operation)</small>	Scheduled Installation Date: _____ (30 DAYS ADVANCE NOTICE REQUIRED)
Facility County: _____	UST Owner: _____
Name: _____	Owner Mailing Address: _____
Physical Address _____	Contact Person: _____
GPS Lat: _____ Long: _____ or <input type="checkbox"/> Map Attached	Contact Phone #: _____

IMPORTANT!: The Department requires double walled tanks and piping with interstitial monitoring as a leak detection method to prevent leaks from all UST systems installed on or after August 6, 2007. UST systems installed without meeting these requirements and not approved by the Department will be required to be permanently closed.

THE INSTALLATION OF ANY OF THE FOLLOWING REQUIRES SUBMITTAL OF PLANS AND SPECIFICATIONS COVERING THE APPROPRIATE ITEM(S) LISTED BELOW. THE PLANS AND SPECIFICATIONS MUST BEAR THE SEAL OR NUMBER OF A PROFESSIONAL ENGINEER REGISTERED IN THE STATE OF ALABAMA.

Specifications must include the Manufacturer, Model and Version of any proposed anchorage system and/or liquid or vapor sensor leak detection equipment. **PLEASE INDICATE IF ANY OF THE ITEMS BELOW APPLY AT THIS SITE.**

- Field Installed Cathodic Protection System will be installed. **(The design of Field Installed Cathodic Protection systems must be performed by a corrosion specialist.)**
- Groundwater Monitoring System will be installed.
- Vapor Monitoring System will be installed.
- UST or UST System will be installed such that the tank(s) will be wholly or partially submerged during any time of the year.

For any of the above that are checked, plans and specifications are required UNLESS the manufacturer's standard design was submitted by an Alabama Registered Professional Engineer and pre-approved by the Department.

- DESIGN PLANS AND SPECIFICATIONS ATTACHED**
 - MANUFACTURER'S DESIGN WAS PRE-APPROVED BY ADEM**
- Name of tank manufacturer _____
- Number of brochure which includes standard design: _____
- Date of brochure _____

AIR DIVISION REQUIREMENTS

ADEM Air Division requires Stage I vapor recovery on all new installations of gasoline tank systems greater than or equal to 3000 gallons that were installed or upgraded after October 1, 1990. Stage I vapor recovery is NOT required for diesel tank systems. As of January 10, 2008, the coaxial vapor balance system is **no longer approved** on new installations of gasoline tank systems at gasoline dispensing facilities subject to 40 CFR Part 63, Subpart CCCCC.

All inquiries concerning this requirement should be directed to ADEM Air Division at (334)271-7861, except for facilities in Jefferson County (205-930-1247) and the city of Huntsville (256-427-5740).

- This is a new installation or upgrade that includes Stage I equipment.
- An ADEM Air Permit Application has been completed.**

PART II. TANK AND/OR NEW PIPING INSTALLATION

For Upgrades Continue on Part III. (Page 4)

A. TANKS

1. Number of new double wall tank system(s) to be installed? _____
2. Size of tank(s)? _____ gallons
3. Proposed use of tank(s):
 - Petroleum products
 - Alternative fuels
 - Waste oil
 - Emergency power
 - Hazardous materials
 - Heating oil

NOTE: Make sure equipment is compatible with alternative fuels.

NOTE: Heating oil tanks are NOT regulated. Completion of this form is not required for heating oil tanks.

B. PIPING

1. Installation of new piping
2. Installation of new piping to replace existing piping

NOTE: A repair of 5 feet of piping or more requires replacing the entire piping run with double walled piping.

NOTE: All piping replacements require submittal of the piping closure assessment portion of ADEM Form #474.

LEAK DETECTION

ONLY LEAK DETECTION EQUIPMENT THAT HAS BEEN DETERMINED BY THE DEPARTMENT TO MEET MINIMUM LEAK DETECTION PERFORMANCE REQUIREMENTS MAY BE USED IN THE STATE OF ALABAMA.

A list of approved equipment is available on the Internet at www.nwglde.org

TANK(S)

**Required for all UST new installations of tanks on or after August 6, 2007*

- * Monthly interstitial monitoring

Method _____

Manufacturer _____ Model _____

List any additional tank release detection methods (e.g. ATG), but not required by regulations:

- Additional method(s) used

Method _____

Manufacturer _____ Model _____

PRESSURIZED PIPING

Group I. Check one of the following:

- Mechanical line leak detector

Manufacturer _____ Model _____

- Interstitial monitoring sump sensor with automatic shutoff device (3.0 gph)

Manufacturer _____ Model _____

- Automatic electronic line leak detector shutoff device (3.0 gph) (non-interstitial)

Manufacturer _____ Model _____

Group II. Interstitial monitoring is required for all UST new installations of pressurized piping on or after August 6, 2007.

- Monthly interstitial monitoring

Method _____

Manufacturer _____ Model _____

List any additional method(s) used for group I or Group II, but not required by regulations:

Method _____

Manufacturer _____ Model _____

SUCTION PIPING *Safe suction*

Only an option when piping slopes towards tank, there is only one check valve in each line and the check valve is located directly below pump. The check valve must be visible for inspection.

(Note: Safe suction piping may be installed as single walled)

*Required for all ust new installations of other than safe suction piping

 Interstitial monitoring for other than safe suction

Method _____

Manufacturer _____ Model _____

List any additional method(s) used, but not required by regulations:

Method _____

Manufacturer _____ Model _____

GRAVITY FEED PIPING

No requirements

MATERIALS OF CONSTRUCTION**TANK(S)**

Inspect interstice or check vacuum or liquid level in interstice in accordance with manufacturers instructions after all construction has been completed, including paving, prior to bringing system into service.

 Coated & factory cathodically protected steel (double walled)

Manufacturer _____

 Fiberglass (double walled)

Manufacturer _____

 Steel tank clad with fiberglass (double walled)

Manufacturer _____

 Steel tank clad with polyurethane in accordance with Steel Tank Institute (STI) ACT-100-U or equivalent standard (double walled)

Manufacturer _____

PIPING

All new nonmetallic piping must meet the latest UL standard 971

 Fiberglass (double or single walled for safe suction)

Manufacturer _____ Model _____

 Steel with secondary containment which provides an air filled annular space *Flexible underground piping (double or single walled for safe suction)*

Manufacturer _____ Model _____

TYPE OF FLEX CONNECTOR *Flexible connector*

Manufacturer _____ Model _____

 Flexible underground piping

Manufacturer _____ Model _____

 Other (please specify) _____

Manufacturer _____ Model _____

SPILL PREVENTION

Catchment basin(s) (spill bucket) Single wall Double wall

Manufacturer _____ Model _____

OVERFILL PREVENTION

- Automatic shutoff device (flapper valve)
 High level overflow alarm (must alert fuel deliverer)
 Ball float vent valve (Cannot be used with pressurized delivery, suction piping, or single point {coaxial} stage 1 vapor recovery.)

UNDER DISPENSER CONTAINMENT

All new dispensers are required to have under dispenser containment that are accessible for annual inspections.

Manufacturer _____ Model _____

SUBMERSIBLE PUMP CONTAINMENT SUMPS

All submersible pumps are required to have secondary containment sumps that are accessible for annual inspections.

Manufacturer _____ Model _____

SKIP TO PAGE 6 FOR OWNER SIGNATURE

PART III. FOR UPGRADING UST SYSTEMS INSTALLED PRIOR TO AUGUST 6, 2007 ONLY

An Upgrade is defined as the addition or retrofit of UST systems including tanks, piping, leak detection, cathodic protection, lining, or spill and overflow controls to improve the ability of an underground storage tank system to detect or prevent the release of product.

Number of tank system(s) to be upgraded _____

Type of upgrade:

- | | | | |
|----------------------------------------------|----------------------------------------|---------------------------------------------|-------------------------------------------|
| <input type="checkbox"/> Tank(s) only | <input type="checkbox"/> Piping only | <input type="checkbox"/> Tank(s) and Piping | <input type="checkbox"/> Spill Prevention |
| <input type="checkbox"/> Overflow Prevention | <input type="checkbox"/> New Dispenser | <input type="checkbox"/> Containment Sumps | <input type="checkbox"/> Other |

LEAK DETECTION

ONLY LEAK DETECTION EQUIPMENT THAT HAS BEEN DETERMINED BY THE DEPARTMENT TO MEET MINIMUM
LEAK DETECTION PERFORMANCE REQUIREMENTS MAY BE USED IN THE STATE OF ALABAMA

A list of approved equipment is available at www.nwglde.org

TANK(S)

- Adding an automatic tank gauge (0.2 gph monthly static test)

Manufacturer _____ Model _____ Probe Model _____

- Adding a continuous automatic tank gauge (CSLD test)

Manufacturer _____ Model _____ Probe Model _____

- Adding vapor monitoring system (Plans and specifications are required - see page 1)

- Adding groundwater monitoring (Plans and specifications are required - see page 1)

- Adding monthly statistical inventory reconciliation (SIR)

SIR vendor _____ Program _____ Version _____

- Adding monthly interstitial monitoring

Describe method of interstitial monitoring _____

Manufacturer _____ Model _____

PRESSURIZED PIPINGCheck one from **EACH** of the following two groups**Group I.** Check one of the following:

-
- Adding mechanical line leak detector (3.0 gph)

Manufacturer _____ Model _____

-
- Adding automatic electronic line leak detector shutoff device (3.0 gph)

Manufacturer _____ Model _____

-
- Adding sump sensor relayed to shut off the pump (3.0 gph)

Manufacturer _____ Model _____

-
- Modifying an existing sump sensor to be able to shut-off the pump (3.0 gph) (All existing Group I systems must be capable of shutting off or restricting flow prior to August 6, 2008.)

Manufacturer _____ Model _____

Group II. Check one of the following:

-
- Annual line testing (0.1 gph)

-
- Automatic electronic line leak detector testing (0.2 gph monthly or 0.1 gph annual test)

Manufacturer _____ Model _____

-
- Monthly vapor monitoring (Plans and specifications are required - see page 1)

-
- Monthly groundwater monitoring (Plans and specifications are required - see page 1)

-
- Monthly statistical inventory reconciliation (SIR)

SIR vendor _____ Program _____ Version _____

-
- Monthly interstitial monitoring

Describe method of interstitial monitoring _____

Manufacturer _____ Model _____

SUCTION PIPING

-
- No Requirements for Safe Suction Only an option when piping slopes towards tank, there is only one check valve in each line and the check valve is located directly below pump. The check valve must be visible for inspection.

-
- Line Testing (0.1 gph) every 3 years

-
- Monthly vapor monitoring (Plans and specifications are required - see page 1)

-
- Monthly groundwater monitoring (Plans and specifications are required - see page 1)

-
- Monthly statistical inventory reconciliation (SIR) (0.2 gph)

SIR vendor _____ Program _____ Version _____

-
- Monthly interstitial monitoring

Describe method of interstitial monitoring _____

Manufacturer _____ Model _____

GRAVITY FEED PIPING

No requirements

CORROSION PROTECTION**TANK(S)**

-
- Adding interior lining (UST Interior Lining Report Form #404 must be completed and returned with an amended ADEM 279 registration form within 30 days of bringing the upgraded system into service.)

-
- Adding impressed current cathodic protection (Plans and specifications are required - see page 1)

PIPING

Closure Report Form #474 must be submitted for closure of piping when **ONLY** piping is replaced.

Adding impressed current cathodic protection (Plans and specifications are required - see page 1)
For Metallic, Fiberglass or Flexible Underground Piping, repairs may be made to existing piping only if one repair of less than 5 ft can be made to one run of piping within a 30 day period. Otherwise complete the new installation portion of this form.

PART IV. CERTIFIED CONTRACTOR

UST SYSTEMS MUST BE INSTALLED BY AN INDIVIDUAL CERTIFIED IN ACCORDANCE WITH ADEM ADMINISTRATIVE CODE RULE 335-6-15-.47. SUBPARAGRAPH (e) OF THIS RULE REQUIRES THESE INDIVIDUALS TO:

- 1. EXERCISE SUPERVISORY CONTROL DURING INSTALLATION,**
- 2. BE PRESENT AT THE JOB SITE DURING CRITICAL JUNCTURES,**
- 3. ENSURE THIS FORM IS SUBMITTED TO THE DEPARTMENT 30 DAYS PRIOR TO INSTALLATION/UPGRADE.**

Visit the ALPEC Website to obtain a list of certified contractors at www.alpec.net or call ALPEC at 334 288-4103.

Certified Installer Name:	Certification Expiration Date:
Company Name:	Phone Number:
Address:	

Signature of Person Completing This Form: _____ Date: _____

PART V. OWNER SIGNATURE

A LETTER INDICATING DEPARTMENT APPROVAL OF THIS FORM AND ALL APPLICABLE DESIGN PLANS AND SPECIFICATIONS MUST BE RECEIVED BY THE UST OWNER PRIOR TO INITIATING CONSTRUCTION. IF THE TANK SYSTEM(S) ARE NOT INSTALLED OR UPGRADED WITHIN 6 MONTHS OF THIS NOTIFICATION, RE-NOTIFICATION IS REQUESTED. ALSO, RE-NOTIFICATION IS REQUIRED IF ANY DESIGN CHANGES ARE MADE AFTER RECEIVING DEPARTMENT APPROVAL.

WITHIN THIRTY (30) DAYS OF BRINGING THE NEW OR UPGRADED SYSTEM INTO SERVICE, A NEW OR AMENDED UST NOTIFICATION FORM #279 SHOULD BE COMPLETED AND SUBMITTED TO THE DEPARTMENT.

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED IN THIS AND ALL ATTACHED DOCUMENTS AND THAT BASED ON THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THAT THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE.

Signature of Owner: _____ Date: _____

AFTER THIS FORM IS COMPLETED AND SIGNED, RETURN IT TO THE FOLLOWING ADDRESS:

***The Alabama Department of Environmental Management
Groundwater Branch
Post Office Box 301463
Montgomery, Alabama 36130-1463***