



**Application for a Permit for  
Aboveground Storage of  
Flammable and Combustible Liquids**

Maine Department of Public Safety  
Office of the State Fire Marshal  
52 State House Station  
Augusta, Maine 04333-0052  
207 626-3880 (Tel.)  
207 287-6251 (Fax)  
<http://www.maine.gov/dps/fmo/home>

**STOP! Do Not purchase a tank or start any site work until the permit has been approved!**

Don't pay for work you will have to pay to undo when the permit is denied.

Go to: <https://www.maine.gov/dps/fmo/plans-review/aboveground> for guidelines to the installation of aboveground storage tanks.

Tanks for heating oil that are connected to oil burners and tanks for propane or natural gas are regulated by the Maine Fuel Board (207) 624-8606.

Underground piping associated with aboveground oil storage tanks is regulated by the Maine Department of Environmental Protection (DEP) (207) 287-7688. Underground piping must be installed by a DEP Certified Installer. All underground piping associated with motor fuel tanks must be registered with the DEP.

A permit is not required for a tank that is part of a listed generator unit. The unit must be installed according to the manufacturer's requirements. The capacity of a generator tank is counted for purposes of a Spill Prevention Control and Countermeasures Plan (SPCC).

A permit is not required for a tank that will be on site no more than 180 days, total. The tank must be installed in compliance with all codes and standards, and the manufacturer's requirements. Maine Department of Environmental Protection Siting Approval is required for a tank that will be on a site for 4 months or more. Contact DEP Directly at (207) 287-7688 if you have a tank that requires DEP Siting Approval, but not a Fire Marshal's Office permit.

A permit from the Office of the State Fire Marshal is required for any tank with a capacity greater than 60 gallons and for Hydrogen storage tanks. Smaller tanks may require a permit in special situations. A DEP registration does not meet this requirement!

**APPLICATION PROCESS:**

COMPLETE and SUBMIT the application, fee and **digital plans and specifications**. Keep a copy for your records!

The fee is \$15 per facility. Make check payable to "Treasurer, State of Maine". Include facility name in the note line on the check.

**Do Not Submit Instructions Pages!**

Submit the application, check, **PDF digital drawings and specifications** for the project by mail. **CD or thumb drive** for the drawings and specs are the acceptable format. **We are no longer accepting paper drawings.** Submit a separate set of specification and plan sheets for each tank on the application. [Page \_\_\_ of \_\_\_ Set \_\_\_ of \_\_\_] Answer ALL questions! Leaving questions blank will delay processing of the application. Call (207) 626-3890 if you have a question about a specific item on the application.

Submit the "Site Plan" and "Side and End View Plan" that will be used for construction of the facility. Plans must show the facility details clearly and must include distances listed. Items must be conspicuously and legibly labeled. Plans for other uses (e.g., municipal permits, zoning, drainage, etc.) are NOT acceptable as they do not show what is needed for this application purpose and much of the information on other types of plans obscures what is needed to process the application.

Submit photographs of the tank(s) (side and end views), labels, appurtenances, and piping if the tanks are available to be photographed.

If this is a change of an existing permit, **submit a copy of the existing permit(s)** marked with the changes. Contact the Office of the State Fire Marshal (207) 626-3890 to determine if there is an existing permit, or to obtain a copy of an existing permit.

**ENGINEER'S CERTIFICATION**

Plans and specifications must be certified by a Maine registered Professional Engineer when the facility will have a total aggregate capacity of 1320 gallons or more.

**DEP SITING REVIEW**

The Fire Marshal's Office will forward the application to Maine DEP for siting approval. DEP may refuse a permit for a violation of DEP siting rules. You must work directly with DEP if there is a problem with the DEP siting approval.

**DEP REGISTRATION**

Include DEP Registration Information for the facility even when the DEP Registration is for underground tanks or underground piping. This will help DEP determine if the site complies with DEP Siting Rules.

**SPILL PREVENTION CONTROL AND COUNTERMEASURES (SPCC) PLAN**

Federal Environmental Protection Agency (EPA) and DEP require a facility has a SPCC when the facility has an aggregate capacity of 1320 gallons or more. Contact EPA or DEP for more information.

**APPLICATION REVIEW**

The Fire Marshal's Office will conduct a preliminary review of the application. The applicant shown on the application will be contacted if additional information or clarification of information is required.

You are NOT PERMITTED to construct or operate the facility if the permit is DENIED. When the permit is issued, it will be sent to the owner listed on the application.

**CHANGES TO APPLICATION, PLANS, SPECIFICATIONS, AND FACILITIES**

Any changes to the plans and specifications submitted with this application must be approved by the Office of the State Fire Marshal prior to their implementation and a copy of the changes to the plans must be submitted when the original plans and specifications are changed.

Changing the plans without prior written approval of the Office of the State Fire Marshal voids a permit issued for a facility.

**CANOPIES, ROOFS, AND STORAGE TANK BUILDINGS**

Include plans with dimensions for any building or structures associated with the facility including canopies, roofs, and enclosures.

There are specific requirements for a building or structure to house or protect an aboveground storage tank in NFPA 30 Chapter 24.

Constructing a building or structure not included on the application will void the permit issued based on the application submitted.

A storage tank building is defined as a structure that encloses more than 50% of the total wall space (including dike walls) surrounding the tanks.

A roof must be no less than 3 feet above the top of the tank, and the vent must terminate above the roof.

**PERMIT BY RULE, AGGREGATE INDUSTRY TANKS**

Application for a permit issued under the Permit by Rule program established pursuant to HP 206-LD 253 must be made on an application specific to that program. A permit for a facility that varies in any way from the Permit by Rule process must be made on this application.

**LEGAL**

Requirements for aboveground storage of flammable and combustible liquids are in Title 25 MRSA §2481, et seq., 16-219 CMR Chapter 34 *Rules and Regulations for Flammable and Combustible Liquids*, NFPA 30 *Flammable and Combustible Liquids Code*, NFPA 30-A *Code for Motor Fuel Dispensing Facilities and Repair Garages*, NFPA 385 *Standard for Tank Vehicles for Flammable and Combustible Liquids* and NFPA 409 *Standard for Aircraft Fuel Servicing*.

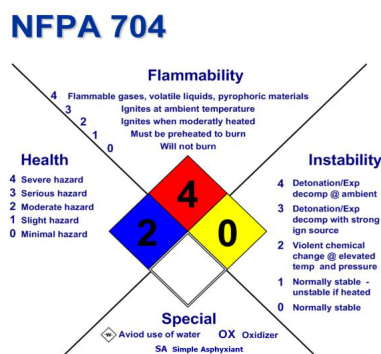
**HAZARD IDENTIFICATION**

Tanks must be marked "No Smoking."

Tanks must be marked with the name of the product.

Tanks must be marked with the NFPA 704 Hazard Identification System shown below. Show the numbers on the application that are appropriate for the product in your tank. These numbers are available from your supplier and from the Material Safety Sheet for the products.

Do not use a DOT transportation placard!





**Application for a Permit for  
Aboveground Storage of  
Flammable and Combustible  
Liquids**

Maine Department of Public Safety  
Office of the State Fire Marshal  
52 State House Station  
Augusta, Maine 04333-0052  
207 626-3880 (Tel.)  
207 287-6251 (Fax)  
<http://www.maine.gov/dps/fmo/home>

| FMO Use Only  |  |
|---|--|
| DEP Siting:<br><input type="checkbox"/> Complies<br><input type="checkbox"/> Exempt<br><input type="checkbox"/> Does Not Comply<br><input type="checkbox"/> May Be Made To Comply<br><input type="checkbox"/> Waiver Requested<br><input type="checkbox"/> Waiver Granted | Permit # _____<br>Issued: _____<br>Action:<br><input type="checkbox"/> Approved per Plan<br><input type="checkbox"/> Approved per Plan and Inspection<br><input type="checkbox"/> Denied<br><input type="checkbox"/> _____<br>By: _____<br>Date: _____ |
| Fee:<br><br>Amount: \$ _____<br><br>Received: _____<br><br>Check #: _____   |  |

| FACILITY:  |   |                               |  |
|--|---|-------------------------------|--|
| Facility Name:                                   |   |                               |  |
| Facility Physical Address:                       |   |                               |  |
| Facility City:                                   | Facility County:  | Facility Zip Code:            |  |
| Facility Telephone:                              |   |                               |  |
| Facility Contact Person:                         | Facility Contact Telephone:   | Facility Contact Email:       |  |
| Total Capacity of Facility:<br><br>U. S. Gallons | Fire Marshal's Office Permit:<br>Number: _____ Issued: _____<br><b>Attach a copy to this application!</b> | <input type="checkbox"/> None |  |
| Facility DEP Registration Number:                | DEP Registration Date:  |                               |  |
| Owner Start Date:                                | Operator Start Date:  |                               |  |

| DEP USE OF FACILITY:                       |   |  |
|--|---|--|
| <input type="checkbox"/> Wholesale Oil     | <input type="checkbox"/> Industrial         | <input type="checkbox"/> Federal Facility        |
| <input type="checkbox"/> Retail Oil        | <input type="checkbox"/> Aggregate Mining   | <input type="checkbox"/> State Facility          |
| <input type="checkbox"/> Public Facilities | <input type="checkbox"/> Chemical Storage   | <input type="checkbox"/> Town or School Facility |
| <input type="checkbox"/> Private Fueling   | <input type="checkbox"/> Multiple Residence |  |
|  | <input type="checkbox"/> Single Residence   |  |

| APPLICANT: (Person submitting application and who should be contacted for additional information) |        |        |           |
|---|--------|--------|-----------|
| Name:   |        |        |           |
| Mailing Address:  | City:  | State: | Zip Code: |
| Physical Address:   | City:  | State: | Zip Code: |
| Telephone, including extension:   | Email: |        |           |

Facility: \_\_\_\_\_ City: \_\_\_\_\_ Application Date: \_\_\_\_\_

**ENGINEER'S CERTIFICATION:**

**Plans and specifications must be certified by a Maine registered Professional Engineer when the total capacity of the facility is 1320 gallons or more.**

I, \_\_\_\_\_ hereby certify that  
 (Name, typed or printed)  
 the facility described on this application is designed according to recognized engineering practices, industry standards, statutes, rules, codes, and standards.

\_\_\_\_\_  
 (Signature)  
 \_\_\_\_\_  
 (Engineer's Company)  
 \_\_\_\_\_  
 (Engineer's Telephone, including extension)  
 \_\_\_\_\_  
 (Engineer's Email)

Engineer's Seal

**TYPE OF PERMIT:**

- New Aboveground Storage Facility **(No existing permit)**
- Change of facility **(Attach a copy of existing permit)**
  - Add tank(s)
  - Replace tank(s)
  - Remove tank(s)
  - Change Product(s)
- Change of Ownership **(Attach a copy of existing permit)**
  - Note changes and corrections to a copy of the existing permit, and submit the corrected copy of the existing permit with the application.
- Corrections to Permit **(Attach a copy of existing permit)**
  - Note changes and corrections to a copy of the existing permit and submit the corrected copy of the existing permit with the application.

**FACILITY OWNER:**

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

|                   |            |        |           |
|-------------------|------------|--------|-----------|
| Mailing Address:  | City:      | State: | Zip Code: |
| Physical Address: | City:      | State: | Zip Code: |
| Contact:          | Telephone: | Email: |           |

Yes  No Is this a new owner?

**Permit will be mailed to "Facility Owner" as shown above.**

**FACILITY OPERATOR:**

Same as Facility Owner

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

|                   |            |        |           |
|-------------------|------------|--------|-----------|
| Mailing Address:  | City:      | State: | Zip Code: |
| Physical Address: | City:      | State: | Zip Code: |
| Contact:          | Telephone: | Email: |           |

Yes  No Is this a new operator?

Facility: \_\_\_\_\_ City: \_\_\_\_\_ Application Date: \_\_\_\_\_

Copy these pages as needed for additional tanks.

Page 1 of 4, Set \_\_\_\_\_ of \_\_\_\_\_

|  |  |
|--|--|
| <b>TANK INFORMATION:</b>   |  |
| Tank Number: (Consecutive Numbers starting at 1)   | Facility Tank Number, if different from Tank Number:                                       |
| Nominal Capacity of tank:<br>US Gallons  | Tank Manufacturer:   |
| Tank Material:<br><input type="checkbox"/> Steel <input type="checkbox"/> Other (Specify): _____   | Tank Orientation:<br><input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical |
| Listing:<br><input type="checkbox"/> UL 80 <input type="checkbox"/> UL 2080 Protected Tank<br><input type="checkbox"/> UL 142 (for Storage only, No Fleet Dispensing) <input type="checkbox"/> UL 2085 Fire Resistant Tank<br><input type="checkbox"/> UL 142 With Factory Installed Dispenser<br><input type="checkbox"/> UL 142 with Secondary Containment <input type="checkbox"/> UL 2245 Tank in a Vault<br><input type="checkbox"/> Other (Specify): _____   |  |
| Use of Tank:<br><input type="checkbox"/> Public Fueling/Fleet Fueling<br><input type="checkbox"/> Automotive <input type="checkbox"/> Aviation <input type="checkbox"/> Marina <input type="checkbox"/> Equipment <input type="checkbox"/> Other: _____<br><input type="checkbox"/> Private Personal Fueling<br><input type="checkbox"/> Automotive <input type="checkbox"/> Aviation <input type="checkbox"/> Marina <input type="checkbox"/> Equipment <input type="checkbox"/> Other: _____<br><input type="checkbox"/> Bulk Storage<br><input type="checkbox"/> Equipment Supply (Specify): _____<br><input type="checkbox"/> Container Storage<br><input type="checkbox"/> Other (Specify): _____ |  |
| Flood Zone: Is the tank in a Flood Zone? If "Yes", specify what means will be used to secure the tank against moving:<br><input type="checkbox"/> Yes <input type="checkbox"/> No  |  |
| Vault: Is the tank in a vault? (A concrete secondary containment dike is NOT a vault.)<br><input type="checkbox"/> Yes <input type="checkbox"/> No If the vault is listed, specify the listing: _____  |  |
| Secondary Containment:<br><input type="checkbox"/> Dike, Concrete <input type="checkbox"/> Double Wall Tank<br><input type="checkbox"/> Dike, Metal <input type="checkbox"/> Remote Impoundment<br><input type="checkbox"/> Dike, Earth <input type="checkbox"/> None  |  |
| Weather Protection:<br><input type="checkbox"/> Inside a building <u>Submit plans and specifications for the building with this application!</u><br>(More than 50% of wall space is enclosed. Building must comply with NFPA 30, Chapter 24, NAPA 1, NFPA 101, and other referenced publications)<br><input type="checkbox"/> Roof with walls (Less than 50% of the total wall space, including dike walls, is enclosed.)<br><input type="checkbox"/> Roof or Canopy Only<br><input type="checkbox"/> None   |  |
| Security:<br><input type="checkbox"/> Chain Link Fence Enclosure Fence is no less than 6 feet high, 10 feet from tank.<br><input type="checkbox"/> Entire property is fenced<br><input type="checkbox"/> Other (Specify): _____  |  |
| Collision Protection:<br><input type="checkbox"/> Barricades<br><input type="checkbox"/> Bollards<br><input type="checkbox"/> Other (Specify): _____   |  |
| Distances:<br>Distance of tank from:<br>Nearest Important Building _____ft      Dispensers _____ft<br>Nearest Property Line _____ft <input type="checkbox"/> Public Fueling Minimum 50 feet<br>Nearest side of a Public Way _____ft <input type="checkbox"/> Private Fueling<br>Other Tanks Minimum 3 feet _____ft <input type="checkbox"/> Mounted on tank (UL2080/2085 Only)<br>Propane Storage Minimum 20 feet _____ft  |  |
| Electrical Wiring and Equipment:<br><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> None Are electrical wiring and electrical equipment within the hazard area defined by the National Electrical Code, NFPA 70 and NFPA 30, installed in compliance with these codes?   |  |
| Tank Leak Detection:<br><input type="checkbox"/> None <input type="checkbox"/> Electronic/Ground Water <input type="checkbox"/> Manual Monitoring/Secondary Containment<br><input type="checkbox"/> Automatic Tank Gauge <input type="checkbox"/> Electronic/Vapor<br><input type="checkbox"/> Electronic/Secondary Containment <input type="checkbox"/> Statistical Inventory Analysis <input type="checkbox"/> Manual Groundwater Sampling<br><input type="checkbox"/> Other (specify): _____  |  |

Facility: \_\_\_\_\_ City: \_\_\_\_\_ Application Date: \_\_\_\_\_

Copy these pages as needed for additional tanks or chambers.

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| CHAMBER INFORMATION  | Chamber 1  | Chamber 2   | Chamber 3   |
|--|--|---|---|
| Capacity (US Gallons)  |  |   |   |
| Product<br>Use generic name, not trade name.   | <input type="checkbox"/> Alcohol<br><input type="checkbox"/> Antifreeze<br><input type="checkbox"/> Asphalt<br><input type="checkbox"/> Biodiesel B1-B74<br><input type="checkbox"/> Biodiesel B75-B99<br><input type="checkbox"/> Biodiesel B100<br><input type="checkbox"/> Crude Oil<br><input type="checkbox"/> Diesel Fuel<br><input type="checkbox"/> #2 Fuel<br><input type="checkbox"/> Gasoline,<br>Aviation<br><input type="checkbox"/> Gasoline, E-85<br><input type="checkbox"/> Gasoline, Leaded<br><input type="checkbox"/> Gasoline, Plus<br><input type="checkbox"/> Gasoline, Premium<br><input type="checkbox"/> Gasoline, Regular<br><input type="checkbox"/> Glycerol<br><input type="checkbox"/> Hydraulic Oil<br><input type="checkbox"/> Jet Fuel<br><input type="checkbox"/> Kerosene<br><input type="checkbox"/> Lube Oil<br><input type="checkbox"/> Methanol<br><input type="checkbox"/> Vegetable Oil<br><input type="checkbox"/> Waste Oil<br><input type="checkbox"/> Other (Specify): | <input type="checkbox"/> Alcohol<br><input type="checkbox"/> Antifreeze<br><input type="checkbox"/> Asphalt<br><input type="checkbox"/> Biodiesel B1-B74<br><input type="checkbox"/> Biodiesel B75-B99<br><input type="checkbox"/> Biodiesel B-100<br><input type="checkbox"/> Crude Oil<br><input type="checkbox"/> Diesel Fuel<br><input type="checkbox"/> #2 Fuel<br><input type="checkbox"/> Gasoline,<br>Aviation<br><input type="checkbox"/> Gasoline, E-85<br><input type="checkbox"/> Gasoline, Leaded<br><input type="checkbox"/> Gasoline, Plus<br><input type="checkbox"/> Gasoline, Premium<br><input type="checkbox"/> Gasoline, Regular<br><input type="checkbox"/> Glycerol<br><input type="checkbox"/> Hydraulic Oil<br><input type="checkbox"/> Jet Fuel<br><input type="checkbox"/> Kerosene<br><input type="checkbox"/> Lube Oil<br><input type="checkbox"/> Methanol<br><input type="checkbox"/> Vegetable Oil<br><input type="checkbox"/> Waste Oil<br><input type="checkbox"/> Other (Specify): | <input type="checkbox"/> Alcohol<br><input type="checkbox"/> Antifreeze<br><input type="checkbox"/> Asphalt<br><input type="checkbox"/> Biodiesel B1-B74<br><input type="checkbox"/> Biodiesel B75-B99<br><input type="checkbox"/> Biodiesel B-100<br><input type="checkbox"/> Crude Oil<br><input type="checkbox"/> Diesel Fuel<br><input type="checkbox"/> #2 Fuel<br><input type="checkbox"/> Gasoline,<br>Aviation<br><input type="checkbox"/> Gasoline, E-85<br><input type="checkbox"/> Gasoline, Leaded<br><input type="checkbox"/> Gasoline, Plus<br><input type="checkbox"/> Gasoline, Premium<br><input type="checkbox"/> Gasoline, Regular<br><input type="checkbox"/> Glycerol<br><input type="checkbox"/> Hydraulic Oil<br><input type="checkbox"/> Jet Fuel<br><input type="checkbox"/> Kerosene<br><input type="checkbox"/> Lube Oil<br><input type="checkbox"/> Methanol<br><input type="checkbox"/> Vegetable Oil<br><input type="checkbox"/> Waste Oil<br><input type="checkbox"/> Other (Specify): |
| Is Product Heated?   | <input type="checkbox"/> Yes <input type="checkbox"/> No   | <input type="checkbox"/> Yes <input type="checkbox"/> No  | <input type="checkbox"/> Yes <input type="checkbox"/> No  |
| Is Product Under Pressure?   | <input type="checkbox"/> Yes <input type="checkbox"/> No   | <input type="checkbox"/> Yes <input type="checkbox"/> No  | <input type="checkbox"/> Yes <input type="checkbox"/> No  |
| Does fill pipe Terminate within 6" of the bottom of the tank?<br>Mandatory for tanks storing Class I liquids   | <input type="checkbox"/> Yes <input type="checkbox"/> No   | <input type="checkbox"/> Yes <input type="checkbox"/> No  | <input type="checkbox"/> Yes <input type="checkbox"/> No  |
| Does filling slow at 90% and stop at 95% of tank capacity?<br>Mandatory for Secondary Containment Tanks.   | <input type="checkbox"/> Yes <input type="checkbox"/> No   | <input type="checkbox"/> Yes <input type="checkbox"/> No  | <input type="checkbox"/> Yes <input type="checkbox"/> No  |
| Overfill Protection  | <input type="checkbox"/> Level Gauge<br><input type="checkbox"/> Vent Whistle<br><input type="checkbox"/> Drop Tube<br><input type="checkbox"/> Electronic<br><input type="checkbox"/> Mechanical<br><input type="checkbox"/> Mech + Elect<br><input type="checkbox"/> None  | <input type="checkbox"/> Level Gauge<br><input type="checkbox"/> Vent Whistle<br><input type="checkbox"/> Drop Tube<br><input type="checkbox"/> Electronic<br><input type="checkbox"/> Mechanical<br><input type="checkbox"/> Mech + Elect<br><input type="checkbox"/> None   | <input type="checkbox"/> Level Gauge<br><input type="checkbox"/> Vent Whistle<br><input type="checkbox"/> Drop Tube<br><input type="checkbox"/> Electronic<br><input type="checkbox"/> Mechanical<br><input type="checkbox"/> Mech + Elect<br><input type="checkbox"/> None   |
| Normal Vent (Size & Type)  |  |   |   |
| Normal Vent (Height Above Ground)<br>Class I Liquids No less than 12 feet above ground   |  |   |   |
| Emergency Vent for Primary Chamber (Size & Type)   |  |   |   |
| Emergency Vent for Interstitial Space (Size & Type)  |  |   |   |
| Marking of Tank:<br>Product Name <b>Mandatory</b><br>"No Smoking" <b>Mandatory</b><br>NFPA 704 Hazard Identification System<br><b>Mandatory</b> (See Instructions, Page 3) | <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Blue<br>Red<br>Yellow<br>White   | <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Blue<br>Red<br>Yellow<br>White  | <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Blue<br>Red<br>Yellow<br>White  |

Facility: \_\_\_\_\_ City: \_\_\_\_\_ Application Date: \_\_\_\_\_

Copy these pages as needed for additional tanks or chamberss.

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|  |  |  |  |
|--|--|--|--|
| <b>TYPE OF PUMP (Factory Mounted Only for UL 142 tanks):</b>   | <input type="checkbox"/> Pressure<br><input type="checkbox"/> Suction<br><input type="checkbox"/> None | <input type="checkbox"/> Pressure<br><input type="checkbox"/> Suction<br><input type="checkbox"/> None | <input type="checkbox"/> Pressure<br><input type="checkbox"/> Suction<br><input type="checkbox"/> None |
| If pump is a pressure pump, is there pressure relief?  | <input type="checkbox"/> Yes <input type="checkbox"/> No   | <input type="checkbox"/> Yes <input type="checkbox"/> No   | <input type="checkbox"/> Yes <input type="checkbox"/> No   |
| If pump is a suction pump, is there an anti-siphon device?   | <input type="checkbox"/> Yes <input type="checkbox"/> No   | <input type="checkbox"/> Yes <input type="checkbox"/> No   | <input type="checkbox"/> Yes <input type="checkbox"/> No   |
| <b>PIPING MATERIAL:</b><br><input type="checkbox"/> Steel <input type="checkbox"/> Other (Specify):  |  |  |  |
| <b>UNDERGROUND PIPING:</b><br><input type="checkbox"/> Yes <input type="checkbox"/> No Is any of the piping underground?<br>If "Yes", Indicate the type of underground piping below: |  |  |  |
| <input type="checkbox"/> Steel, Asphalt Coated   | <input type="checkbox"/> Steel, Cathodic Protected   | <input type="checkbox"/> Steel, Secondary Containment  | <input type="checkbox"/> Fiberglass, Single Walled   |
| <input type="checkbox"/> Fiberglass, Secondary Containment, Petro  | <input type="checkbox"/> Fiberglass, Petroleum   | <input type="checkbox"/> Fiberglass, Sec Cont, Petro, Alcohol  | <input type="checkbox"/> Composite Fiberglass with Bonded Steel  |
| <input type="checkbox"/> Composite with Cathodic Protection  | <input type="checkbox"/> Composite with Secondary Containment  | <input type="checkbox"/> Copper  | <input type="checkbox"/> Black Steel   |
| <input type="checkbox"/> PVC   | <input type="checkbox"/> Stainless Steel   | <input type="checkbox"/> Double Wall Cathode Protected Steel   | <input type="checkbox"/> Flexible Single Walled Piping   |
| <input type="checkbox"/> Flexible Double Walled Piping   | <input type="checkbox"/> Copper with Secondary Containment   |  |  |
| <b>PIPING LEAK DETECTION:</b>  |  |  |  |
| <input type="checkbox"/> None  | <input type="checkbox"/> Manual Monitoring, Secondary Containment                                      | <input type="checkbox"/> Electronic, Secondary Containment   | <input type="checkbox"/> Manual Groundwater Sampling   |
| <input type="checkbox"/> Electronic, Groundwater   | <input type="checkbox"/> Statistical Inventory Analysis  | <input type="checkbox"/> Continuous Electronic Vapor Monitoring  |  |



Facility: \_\_\_\_\_ City: \_\_\_\_\_ Application Date: \_\_\_\_\_

Copy these pages as needed for additional tanks.

Page 4 of 4, Set \_\_\_\_\_ of \_\_\_\_\_

**SIDE AND END VIEWS PLAN**

**(These are the plans to be used to construct the facility!)**

**Show All of the Following on this Diagram:**

- |                                |                        |                     |                     |                             |
|--------------------------------|------------------------|---------------------|---------------------|-----------------------------|
| >Base Material                 | >Emergency Vents       | >Piping             | >Protection         | >Buildings and Dimensions   |
| >Ground and Foundation         | >Primary Chamber       | >Routing of Piping  | >Fire Extinguishing | >Building Construction Type |
| >Type of Secondary Containment | >Type and Size         | >Piping Connections | >From Flooding      | >Building Materials         |
| >Dike                          | >Interstitial Space    | >Valves             | >From Collision     | >Floor Plan                 |
| >Construction Material         | >Type and Size         | >Anti-Siphon        | >From Tampering     | >Exit Routes and Exit Signs |
| >Inside Dimensions             | >Electrical Equipment  | >Pressure Relief    |                     | >Alarm System               |
| >Capacity                      | >Emergency Disconnects | >Break-away         | >Tank Marking       | >Emergency Lights           |
| >Drain and Valve               |                        | >Piping Supports    | >"No Smoking"       | >Sprinkler System Specs     |
| >Remote Impounding             | >Loading Docks         | >Spill Bucket       | >Product Name       | >Secondary Containment      |
| >Tanks                         | >Vehicle Containment   | >Color Code         | >NFPA 704 Placard   | >Tank Fill and Vent         |
| >Tank Supports                 | >Bonding Connection    | >On Tanks           |                     | >Roofs and Canopies         |
| >Normal Vents                  | >Self Closing Valves   | >On Piping          |                     | >Construction Plans         |
| >Type and Size                 |                        |                     |                     | >Height Above Top of Tank   |
| >Height Above Ground           |                        |                     |                     | >Vent Termination           |

Facility: \_\_\_\_\_ City: \_\_\_\_\_ Application Date: \_\_\_\_\_

**SITE PLAN**

**(This is the plan to be used to construct the facility!)**

| <b>Show the Location of All of the Following on this Plan:</b>                                       |   |  | <b>Show the Distance from the Tanks to the following on this plan:</b> |   | Indicate<br><b>NORTH</b><br>With Arrow |
|--|---|--|--|---|--|
| >Tanks and Dikes<br>>Buildings<br>>Property Lines<br>>Public Ways<br>>Dispensers<br>>Propane Storage | >Electrical Controls<br>>Emergency Disconnects<br>>Fire Extinguishing<br>Equipment<br>>Security Features<br>>Collision Protection | >Loading & Unloading<br>Piping<br>>Sump Leak Detection<br>>Remote Impounding<br>>Designated Smoking Area | >Buildings<br>>Property Lines<br>>Public Ways                          | >Other Tanks<br>>Dispensers<br>>Propane Storage |  |
|  |   |  |  |   |  |

Section A-1

If you answer "Yes" to any of the following questions, your facility is exempt from the siting restrictions.

Yes No

1. Was the tank facility installed before September 30, 2008?
2. Will the facility be used solely to store heating oil that is consumed on site, not resold?
3. Is the facility replacing an aboveground oil storage facility that was installed before September 30, 2008 that is on the same property?
4. Is the facility replacing or expanding an underground oil storage facility that was registered on or before September 30, 2008 and is presently on the same property?

If "Yes" enter the DEP Registration Number: \_\_\_\_\_

Section A-2

If you answered "No" to all the questions in A-1, complete this section.

1. Will any portion of the facility be installed after September 30, 2008?  
(If "No", Section A-2 does not apply to the tank(s) you are installing.)
2. Will any portion of the facility be located within 300 feet of a private well or water supply?  
(This does not include a private well located on the same lot as the facility and serving only users living on that property.)
3. Will any portion of the facility be located within the source water protection area of a public drinking water well mapped by the Department of Human Services or within 1000 feet of a public water well, whichever is greater?  
Maps of source water protection areas are available on the internet at [www.maine.gov/dhs/eng/water/index.htm](http://www.maine.gov/dhs/eng/water/index.htm). Public water supplies are defined as any well or water supply where water is obtained, sold, furnished, or distributed to the public for human consumption. The well or water supply must meet one or more of the following requirements to be a public water supply:
- Serves more than 15 connections, OR
  - Regularly Serves at least 25 individuals daily for at least 60 days of the year, OR
  - Provides bottled water for sale where the water is pumped from on site.
4. Does the well or water supply serve a school or community water supply system?  
(A school is an institution for the formal classroom instruction of children in grades k-12. A community water system is a public water system that serves at least 15 service connections used by year-round residents or regularly serves at least 25 year-round residents.)
5. Will any portion of the facility be located within a mapped significant sand and gravel aquifer?  
As of July 1, 2010, Maine law prohibits installation of ASTs within significant sand and gravel aquifers mapped by the Maine Geological Survey unless a variance is obtained from the Department of Environmental Protection (DEP).

If the answer to #2 or #4 above is "Yes", a new aboveground oil storage facility may not be installed unless the applicant proves there is no hydrogeologic connection between the proposed facility and the water supply at issue. Contact DEP at (207) 287-7688 to obtain information on the procedures to follow to determine if a hydrogeologic connection exists.

If the answer to #3 is "Yes" and the answer to #4 is "No", then a variance from the siting restriction may be granted upon written application to DEP if DEP determines that the proposed installation is designed to exceed minimum regulatory requirements and will effectively minimize releases of oil and the likelihood of drinking water contamination.

If the answer to #5 is "YES", Please review Chapter 692, Section (4)-(B) through (E) to determine if a variance may be applicable for the proposed site. Contact DEP for an application for a variance.

For questions about the siting law, please call (207) 287-7688 or visit the DEP Drinking Water Protection website: [www.maine.gov/dep/rwm/drinkingwater/index.htm](http://www.maine.gov/dep/rwm/drinkingwater/index.htm)