**APPENDIX II - CERTIFICATION OF UNDERGROUND STORAGE TANK INSTALLATION** Form 02 (Rev. 8/12)

Guam Environmental Protection Agency, Hazardous Waste Management Program,

P.O. BOX 22439, GMF, Barrigada, Guam 96921

**Facility Name Permit No.**

**Part I. CERTIFICATION OF COMPLIANCE FOR NEW AND MODIFIED TANKS** (Complete for each at this location)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Tank Number | Tank No. \_\_\_  | Tank No. \_\_\_ | Tank No. \_\_\_ | Tank No. \_\_\_ | Tank No. \_\_\_ |
| 1. Installation |  |  |  |  |  |
| A, Installation certified by tankand piping manufacturers |  |  |  |  |  |
|  B. Installation inspected by  a registered engineer |  |  |  |  |  |
|  C. Installation inspected and approved by the Agency |  |  |  |  |  |
|  D. Manufacturer's installation checklists have been  completed and documented |  |  |  |  |  |
|  E. Another method allowed by the Agency. Please specify |  |  |  |  |  |

**Part II. INSTALLER'S CERTIFICATION**

I certify the information concerning installation that is provided in section I is true to the best of my belief and knowledge.

Installer Name Signature Date

Position Company

**Part III. OPERATOR'S AND OWNER'S CERTIFICATION FOLLOWING INSTALLATION**

Were any changes made to the original installation plans? \_\_\_\_\_ No \_\_\_\_\_\_ Yes - Complete and Submit Part IV

I have received the manufacturer's operations manual, the certification of performance on all permanently installed leak detection equipment (if applicable), and other documentation regarding the equipment that has been installed.

Y/N (Operator) \_\_\_\_\_ OR Y/N (Owner) \_\_\_\_\_

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 my inquiry of those individuals immediately responsible for obtaining the

information, I believe that the submitted information is true, accurate, and complete.

Operator's Name Operator's Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Owner's Name Owner's Signature

**Part IV. CHANGES TO ORIGINAL INSTALLATION PLANS** (Complete this Part only if changes were made to the original installation plans)

**FINANCIAL RESPONSIBILITY (Check all that apply)**

\_\_\_ Self Insurance \_\_\_ Commercial Insurance \_\_\_ Risk Retention Group \_\_\_ Guarantee \_\_\_ Surety Bond \_\_\_ Letter of

Credit \_\_\_ Trust Fund \_\_\_ Exempt: State or Federal Agency \_\_\_Other Method Allowed (Specify)

**DESCRIPTION OF TANK(S) (Complete for each at this location)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Tank Number | Tank No. \_\_\_  | Tank No. \_\_\_ | Tank No. \_\_\_ | Tank No. \_\_\_ | Tank No. \_\_\_ |
| 1. Status of Tank (Mark only one) |  |  |  |  |  |
|  A, Currently in use |  |  |  |  |  |
|  B. Temporarily Out of Use (Also complete Section X) |  |  |  |  |  |
|  C. Permanently Out of Use (Also complete Section X) |  |  |  |  |  |
|  D. Installed prior to \_\_\_\_\_\_\_  but not yet brought into use |  |  |  |  |  |
|  E. To be installed |  |  |  |  |  |
| 2. Proposed Date of Activity (Installation, Modification, Closure, etc.) (mo./day/year) |  |  |  |  |  |
| 3. Estimated Total Capacity (gallons) |  |  |  |  |  |
| 4. Substance Stored |  |  |  |  |  |
|  A. Gasoline |  |  |  |  |  |
|  B. Diesel  |  |  |  |  |  |
|  C. Gasohol |  |  |  |  |  |
|  D. Kerosene |  |  |  |  |  |
|  E. Used Oil |  |  |  |  |  |
|  F. JP-4 |  |  |  |  |  |
| 1. Non-Petroleum Hazardous

 Substance (CERCLA name and/or CAS#) |  |  |  |  |  |
| 1. Mixture of Substances,

 Please specify |  |  |  |  |  |
|  I. Other, Please specify |  |  |  |  |  |
| 5. Substance Compatible with Tank and Piping (Y/N) |  |  |  |  |  |
| 6. Tank (Mark all that apply) |  |  |  |  |  |
|   A. Primary Containment Material |  |  |  |  |  |
|  i. Fiberglass reinforced plastic (FRP) |  |  |  |  |  |
|   ii. Steel |  |  |  |  |  |
|   iii. Other, Please specify |  |  |  |  |  |
|  B. Secondary Containment Material |  |  |  |  |  |
|  i. Double walled |  |  |  |  |  |
|  a. FRP |  |  |  |  |  |
|  b. Steel |  |  |  |  |  |
|  c. Other, Please specify |  |  |  |  |  |
|  ii. Other secondary containment |  |  |  |  |  |
|  a. FRP |  |  |  |  |  |
|  b. Other, Please specify |  |  |  |  |  |
|  C. Corrosion Protection (except FRP tanks) |  |  |  |  |  |
|  i. Fiberglass coated steel |  |  |  |  |  |
|  ii. Double walled steel |  |  |  |  |  |
|  iii. Impressed current system |  |  |  |  |  |
|  iv. Sacrificial anode system |  |  |  |  |  |
|  v. Corrosion expert  determination |  |  |  |  |  |
|  vi. Other, Please specify |  |  |  |  |  |
| 7. Piping (Mark all that apply) |  |  |  |  |  |
|  A. Primary Containment Material |  |  |  |  |  |
|  i. Rigid fiberglass |  |  |  |  |  |
|  ii. Flex piping |  |  |  |  |  |
|  iii. Other |  |  |  |  |  |
|  B. Type of Secondary Containment |  |  |  |  |  |
|  i. Lined trench |  |  |  |  |  |
|  ii. Rigid double walled piping |  |  |  |  |  |
|  iii. Flex double walled piping |  |  |  |  |  |
|  iv. Other |  |  |  |  |  |
|  C. Corrosion Protection (except  FRP piping) |  |  |  |  |  |
|  i. Fiberglass coated steel |  |  |  |  |  |
|  ii. Impressed current system |  |  |  |  |  |
|  iii. Sacrificial anode system |  |  |  |  |  |
|  iv. Corrosion expert  determination |  |  |  |  |  |
|  v. Other, Please specify |  |  |  |  |  |
| 8.Method of Product Dispensing |  |  |  |  |  |
|  A. Suction |  |  |  |  |  |
|  B. Safe Suction |  |  |  |  |  |
|  C. Pressure |  |  |  |  |  |
|  D. Not applicable |  |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 9. Spill and Overfill Prevention |  |  |  |  |  |
|  A. Overfill device installed |  |  |  |  |  |
|  i. Automatic shutoff device |  |  |  |  |  |
|  ii. Overfill alarm |  |  |  |  |  |
|  iii. Ball float valve |  |  |  |  |  |
|  B. Spill device installed |  |  |  |  |  |
| 10. Release Detection (Mark all that apply) | TANK | PIPE | TANK | PIPE | TANK | PIPE | TANK | PIPE | TANK | PIPE |
|  A. Manual tank gauging |  | NA |  | NA |  | NA |  | NA |  | NA |
|  B. Tank tightness testing |  | NA |  | NA |  | NA |  | NA |  | NA |
|  C. Inventory control |  | NA |  | NA |  | NA |  | NA |  | NA |
|  D. Automatic tank gauging |  | NA |  | NA |  | NA |  | NA |  | NA |
|  E. Vapor monitoring |  |  |  |  |  |  |  |  |  |  |
|  F. Groundwater monitoring |  |  |  |  |  |  |  |  |  |  |
|  G. Interstitial monitoring |  |  |  |  |  |  |  |  |  |  |
|  H. Statistical inventory  reconciliation |  |  |  |  |  |  |  |  |  |  |
|  I. Automatic line leak detectors | NA |  | NA |  | NA |  | NA |  | NA |  |
|  J. Line tightness testing | NA |  | NA |  | NA |  | NA |  | NA |  |
|  K. Other method approved by the  department. Please specify |  |  |  |  |  |  |  |  |  |  |
| 11. Tank or Pipe Repaired (Y/N) |  |  |  |  |  |  |  |  |  |  |
|  A. Date |  |  |  |  |  |  |  |  |  |  |
|  B. Description of repair |  |  |  |  |  |  |  |  |  |  |

**FACILITY DRAWING**

Include a drawing showing the general layout of the facility. This drawing should be no larger than 11 by 17 inches and preferably to scale. This drawing should show the following:

A. The property boundaries of the facility;

B. Identification of streets, roads and nearby bodies of water;

C. Identification of nearby facilities;

D. Location of buildings at the facility;

E. The approximate dimensions of the property boundaries and major buildings;

F. Location of all USTs (identified by number consistent with the tank numbers in Sections IX - X), dispenser pumps, and

 associated pipings: and

G. Indication of North/South direction. NEW OR UPGRADED TANKS

**NEW OR UPGRADED TANKS**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Tank Number | Tank No. \_\_\_  | Tank No. \_\_\_ | Tank No. \_\_\_ | Tank No. \_\_\_ | Tank No. \_\_\_ |
| 1. Tank A. Manufacturer/Model |  |  |  |  |  |
|  B. Underwriter Laboratory(UL)# |  |  |  |  |  |
|  C. Leak Detection Permanently Installed Equipment  Manufacturer/model |  |  |  |  |  |
| 2. Piping  |  |  |  |  |  |
|  A.. Primary containment i. Manufacturer/Model |  |  |  |  |  |
|  ii. Diameter in inches |  |  |  |  |  |
|  iii. UL # |  |  |  |  |  |
|  B. Secondary containment i. Manufacturer/Model |  |  |  |  |  |
|  ii. Diameter in inches |  |  |  |  |  |
|  iii. UL # |  |  |  |  |  |
|  C. Leak Detection Permanently  Installed Equipment Manufacturer/Model |  |  |  |  |  |
|  D. Dispenser drip pan.  Make/Model |  |  |  |  |  |
| 3. Tank Pump Manufacturer/Model |  |  |  |  |  |