



Application for Underground Storage Tank Permit

<p>Select Type</p> <p><input type="checkbox"/> Installation \$100.00 per tank</p> <p><input type="checkbox"/> Extraction \$100.00 per tank</p> <p><input type="checkbox"/> Abandonment \$ 100.00 per tank</p> <p><input type="checkbox"/> Re-piping \$ 100.00 per tank</p> <p><input type="checkbox"/> Follow-Up \$ 100.00 per tank</p>	<p>Class of Work</p> <p><input type="checkbox"/> New Facility</p> <p><input type="checkbox"/> Closed Facility</p> <p><input type="checkbox"/> Repair</p> <p><input type="checkbox"/> Addition</p>	<p>Structure</p> <p><input type="checkbox"/> Service Station</p> <p><input type="checkbox"/> Commercial</p> <p><input type="checkbox"/> Multi-family Residential</p> <p><input type="checkbox"/> Other _____</p>
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Tank #1	Tank Fee: \$	Tank size:	Product Stored:
Tank #2	Tank Fee: \$	Tank size:	Product Stored:
Tank #3	Tank Fee: \$	Tank size:	Product Stored:
Tank #4	Tank Fee: \$	Tank size:	Product Stored:
Tank #5	Tank Fee: \$	Tank size:	Product Stored:

Total Amount \$ _____

Contractor/Applicant:	
Applicant Address:	
Site Address:	
Contact Name:	Telephone:
Contact Email:	
Event Start Date:	Event End Date:
Comments:	

At time of payment, the applicant must submit any required copies of certifications, site plans and/or other documentation as stated by the North Carolina Fire Code and the City of Wilson Fire Marshal's Office. After application is approved, inspections must be scheduled with the Fire Marshal's Office no less than 24 hours in advance of the inspection. Permit shall be approved 10 business days before work is done.

Mail Application, documentation, or submit in person: City of Wilson Fire Rescue Services 307 Hines St W, Wilson, NC 27893. **Once permit is approved, you will be contacted on how to pay.**

Signature: _____ **Date:** _____

Fire/Rescue Use Only	
Date Received:	Receipt/Permit #:
Date Reviewed:	Reviewed by:
<input type="checkbox"/> Approved <input type="checkbox"/> Denied	



Tank Removal Checklist

The Wilson Fire/Rescue Services Community Risk Reduction Division requires that a permit be obtained for the removal of all underground storage tanks. The tank removal guidelines listed below shall be submitted at least **10 business** days prior to the issuance of a permit.

**Any additional findings, information, changes to the site, or the overall scope of the work being performed shall be reported to the fire code official immediately for approval. Not providing adequate notification to the fire code official may result in a revocation of the permit and the immediate termination of all work on the site.

Complete Permit Application for Underground Storage Tanks and have a copy of the permit on site.

The owner, site contractor, or an approved, responsible, representative shall be on site and provide all appropriate contact information to the fire code official prior to beginning any site work. A pre-removal site inspection/consultation shall also be conducted prior to beginning the removal of the tank(s).

The site shall be secured with approved barrier devices to prevent pedestrian and vehicular access to the site. **NO SMOKING** signage may also be required while operating on the site.

There shall be a minimum of one 10 lbs ABC fire extinguisher on site before the tank(s) can be removed.

Site Information shall include but not limited to the following:

- **Size and number of tanks**
- **Type of construction of tank(s)**
- **Contents of the tank(s)**
- **Location of existing underground utilities**
- **Method to be used to remove liquid and vapor from the tank(s).**
- **Amount of liquid to be removed**
- **Model of Gas Meter to be used and the date of last calibration. Atmosphere in the tank(s) shall be less than 10 % LEL or 5% Oxygen.**
- **“Bump Testing” will also be required before collecting readings to ensure accurate monitor readings.**
- **Method of transportation of tank(s) provided and the destination of removed tanks.**

The Fire Code Official shall be on site to verify all contents have been removed prior to the removal of the tanks. Sufficient ground cover must be excavated in order for the tanks to be removed without causing any sparks or ignition.

The tank(s) shall be made safe by inerting with dry ice (**15 to 25 pounds per 1,000-gallon capacity**) or compressed gas such as Nitrogen or Carbon Dioxide. All openings except the vent are to be plugged and the Oxygen level should be **5%** or less. Once tank is vapor-safe, remove all purging or inerting equipment, and close all openings by approved methods.



Tank Removal Checklist

Complete the excavation of soil to a point where the tank can be safely removed. The tank is to be removed by lifting from the soil. Dragging or rolling the tank is not a safe or approved method. Under no time shall the tank be penetrated, cut, or altered without prior approval from the fire code official. All tank piping, vents, fixtures, lines, and other appurtenances shall be removed. Piping will not be permitted to be abandoned in place without prior approval by the fire code official.

Once removed, the tank shall be secured on the approved transport vehicle. It is to be labeled with the product name, location of removal, "Not Safe for Storage," and date of removal. A manifest for the transportation of tank may also be required by the fire code official.

I hereby certify that I have read and examined this application and its attachments and that all of the information contained therein is true and correct. Furthermore, I _____ certify that the proposed Tank(s) Removal fully complies with the requirements contained in the North Carolina State Fire Prevention Code, Wilson Fire/Rescue Service Community Risk Reduction Division requirements, and the City of Wilson Zoning requirements. I agree to indemnify, save harmless, and defend the City of Wilson, its agents and employees, from all claims, damages, costs, expenses, and charges, including attorney's fees, which arise out of or due to the installation of the fire protection system and or hood system.

Applicant

Property Owner (if applicable)

Print _____

Print _____

Signature: _____

Signature: _____

Date: _____

Date: _____

Mail Application, documentation and payment to:

City of Wilson Community Risk Reduction 307 Hines St W, Wilson NC 27893

OR submit in person to:

City of Wilson Fire/Rescue Services 307 Hines St W, Wilson, NC 27893.

Questions? Please contact Wilson Fire/Rescue Services Community Risk Reduction Division at (252) 399-2880.