

ADVANCE NOTICE for UNDERGROUND STORAGE TANK INSTALLATION or CLOSURE



Minnesota Pollution Control Agency (MPCA)
Hazardous Waste Division Tanks and Spills Section
520 Lafayette Road North St. Paul, MN 55155
Telephone (612) 297-8657 or 1 (800) 657-3864
Fax (612) 297-8676

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12032

Advance notice for underground storage tank installation and closure is required by Minn. Stat. ch. 116 and Minn. Rules ch. 7150.

Phoned in or completed by: <u>Mall</u> Title: <u>owner</u> Phone: <u>397 252 0945</u> Date: <u>12-1-98</u>	For MPCA office use: Site #: _____ Install #: _____ Removal #: _____
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SITE INFORMATION Site Name: <u>Petro Pump</u> Address: <u>CORP ST 194</u> City: <u>Clearwater</u> County: _____ Zipcode: <u>3338</u> Phone: <u>Wright</u> Contact Person: _____ Has tank site previously been registered with the MPCA? <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> unknown If yes, MPCA site #: _____	OWNER INFORMATION Owner Name: _____ Address: _____ City: _____ State: _____ Zipcode: _____ Phone: _____ Contact Person: _____
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TANK INFORMATION Please attach additional pages if reporting more than five tanks.

Please check applicable box.

Tank # <u>008</u> <input type="checkbox"/> install tank & pipe <input type="checkbox"/> install tank <input type="checkbox"/> install pipe <input checked="" type="checkbox"/> remove tank & pipe <input type="checkbox"/> remove tank <input type="checkbox"/> remove pipe <input type="checkbox"/> close tank in place	Tank # _____ <input type="checkbox"/> install tank & pipe <input type="checkbox"/> install tank <input type="checkbox"/> install pipe <input type="checkbox"/> remove tank & pipe <input type="checkbox"/> remove tank <input type="checkbox"/> remove pipe <input type="checkbox"/> close tank in place	Tank # _____ <input type="checkbox"/> install tank & pipe <input type="checkbox"/> install tank <input type="checkbox"/> install pipe <input type="checkbox"/> remove tank & pipe <input type="checkbox"/> remove tank <input type="checkbox"/> remove pipe <input type="checkbox"/> close tank in place	Tank # _____ <input type="checkbox"/> install tank & pipe <input type="checkbox"/> install tank <input type="checkbox"/> install pipe <input type="checkbox"/> remove tank & pipe <input type="checkbox"/> remove tank <input type="checkbox"/> remove pipe <input type="checkbox"/> close tank in place	Tank # _____ <input type="checkbox"/> install tank & pipe <input type="checkbox"/> install tank <input type="checkbox"/> install pipe <input type="checkbox"/> remove tank & pipe <input type="checkbox"/> remove tank <input type="checkbox"/> remove pipe <input type="checkbox"/> close tank in place
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Tank type: _____	Tank type: _____	Tank type: _____	Tank type: _____	Tank type: _____
Capacity: <u>10000</u>	Capacity: <u>560</u>	Capacity: _____	Capacity: _____	Capacity: _____
Product: <u>H₂O</u>	Product: <u>W₂O</u>	Product: _____	Product: _____	Product: _____
Pipe type: _____	Pipe type: _____	Pipe type: _____	Pipe type: _____	Pipe type: _____
Is tank registered? _____	Is tank registered? _____	Is tank registered? _____	Is tank registered? _____	Is tank registered? _____

INSTALLATION Installation Date: _____ Contractor #1 Name: _____ Certification Number: _____ Contractor #2 Name: _____ Certification Number: _____	CLOSURE Closure Date: <u>12-10-98</u> Contractor #1 Name: <u>Janice Cedar</u> Certification Number: _____ Contractor #2 Name: _____ Certification Number: <u>632</u> Tank Disposal Company's Name: _____
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COMMENTS (attach additional sheets if necessary)

Informational packet sent to: site owner other (include address in "Comments" block)