

# 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

*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>Jim Tenhoff</u> Title: <u>Rollies</u> Phone: <u>612-859-4811</u> Date: <u>4-23-96</u>	For MPCA office use: Site #: <u>5850</u> Install #: _____ Removal #: _____
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**SITE INFORMATION** Crosby City

Site Name: ~~Rollies Auto Shop~~  
 Address: 29 W. Main St  
 City: Crosby  
 County: Crow Wing Zipcode: 56441  
 Phone: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_

Has tank site previously been registered with the MPCA?  
 yes  no  unknown  
 If yes, MPCA site #: 5850

**OWNER INFORMATION**

Owner Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State: 7 Zipcode: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_

**TANK INFORMATION** *Please attach additional pages if reporting more than five tanks.*

Please check applicable box.

Tank # <u>001</u>	Tank # <u>002</u>	Tank # _____	Tank # _____	Tank # _____
<input type="checkbox"/> install tank & pipe	<input type="checkbox"/> install tank & pipe	<input type="checkbox"/> install tank & pipe	<input type="checkbox"/> install tank & pipe	<input type="checkbox"/> install tank & pipe
<input checked="" type="checkbox"/> install tank	<input checked="" type="checkbox"/> install tank	<input type="checkbox"/> install tank	<input type="checkbox"/> install tank	<input type="checkbox"/> install tank
<input type="checkbox"/> install pipe	<input type="checkbox"/> install pipe	<input type="checkbox"/> install pipe	<input type="checkbox"/> install pipe	<input type="checkbox"/> install pipe
<input type="checkbox"/> remove tank & pipe	<input type="checkbox"/> remove tank & pipe	<input type="checkbox"/> remove tank & pipe	<input type="checkbox"/> remove tank & pipe	<input type="checkbox"/> remove tank & pipe
<input checked="" type="checkbox"/> remove tank	<input checked="" type="checkbox"/> remove tank	<input type="checkbox"/> remove tank	<input type="checkbox"/> remove tank	<input type="checkbox"/> remove tank
<input type="checkbox"/> remove pipe	<input type="checkbox"/> remove pipe	<input type="checkbox"/> remove pipe	<input type="checkbox"/> remove pipe	<input type="checkbox"/> remove pipe
<input type="checkbox"/> close tank in place	<input type="checkbox"/> close tank in place	<input type="checkbox"/> close tank in place	<input type="checkbox"/> close tank in place	<input type="checkbox"/> close tank in place

Tank type: \_\_\_\_\_ Capacity: 10K Product: crude Pipe type: DWV Is tank registered?

Tank type: \_\_\_\_\_ Capacity: 2K Product: oil Pipe type: DWV Is tank registered?

Tank type: \_\_\_\_\_ Capacity: \_\_\_\_\_ Product: \_\_\_\_\_ Pipe type: \_\_\_\_\_ Is tank registered? \_\_\_\_\_

Tank type: \_\_\_\_\_ Capacity: \_\_\_\_\_ Product: \_\_\_\_\_ Pipe type: \_\_\_\_\_ Is tank registered? \_\_\_\_\_

Tank type: \_\_\_\_\_ Capacity: \_\_\_\_\_ Product: \_\_\_\_\_ Pipe type: \_\_\_\_\_ Is tank registered? \_\_\_\_\_

**INSTALLATION** APT Polytech pipe

Installation Date: 4-24-96  
 Contractor #1 Name: Rollies  
 Certification Number: 18  
 Contractor #2 Name: \_\_\_\_\_  
 Certification Number: \_\_\_\_\_

**CLOSURE**

Closure Date: \_\_\_\_\_  
 Contractor #1 Name: \_\_\_\_\_  
 Certification Number: \_\_\_\_\_  
 Contractor #2 Name: \_\_\_\_\_  
 Certification Number: \_\_\_\_\_  
 Tank Disposal Company's Name: \_\_\_\_\_

**COMMENTS** (attach additional sheets if necessary)

replacing piping + installing island  
He talked to Stan to do job early -  
Stan gave me a warning citation

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

MPCA Initials  
JH