



Guil-Rand Fire Department
Fire Marshal's Office
Above/Below Ground Storage Tank Permit Application



This application is hereby made to the Guil-Rand Fire Department by the undersigned for a permit to install, remove, close, abandon, change in service, or upfit a storage tank.

Date of Application: _____

Project Start Date: _____ Project End Date: _____

Project Name: _____

Project Address: _____

Applicant Name: _____ Phone: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Email Address: _____

Property Owner: _____ Phone: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Contractor: _____ Phone: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Design Professional: _____ Phone: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____



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FILL IN ALL FIELDS THAT APPLY TO YOUR PROJECT

- You **shall** submit a copy of the ***NC DEQ Notification/Permit***
- Are plans, drawings and specifications submitted with the application?
☐ Yes ☐ No
- **Type of Project:**
☐ New Construction ☐ Installation ☐ Removal ☐ Remodel/Renovation
☐ Upfit ☐ Secondary Containment
- **Equipment Type:** ☐ New ☐ Used ☐ Addition ☐ Existing

| UST Info | Tank# 1 | Tank# 2 | Tank#3 | Tank#4 | Tank# 5 |
|------------------------|---------|---------|--------|--------|---------|
| Tank Capacity: | | | | | |
| Substance Stored: | | | | | |
| Is Tank Regulated? | | | | | |
| Tank Constructed of: | | | | | |
| Piping Constructed of: | | | | | |

- Does the contractor have a meter on scene to monitor the atmosphere inside the tank(s) before removal? ☐ Yes ☐ No
- Has the air monitor used to sample the atmosphere inside the tank(s) been appropriately maintained and tested? ☐ Yes ☐ No
- Date air monitor was last tested with appropriate gas: _____
- Will Tanks be abandoned in place? ☐ Yes ☐ No
 - If yes, provide justification and **NFPA 30/NCFC compliance plan.**



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- How do you plan to safeguard tank(s) for removal and transport?
 - ☐ Purge to lower Oxygen level to **8% or less**
 - ☐ Purge to lower flammable vapor limit to **20% LEL or less**
 - ☐ Other, list: _____
 - Is the tank(s) to be destroyed? ☐ Yes ☐ No
 - If (yes) Please list Demolition Contractor: _____
 - If (no) Where will the tanks be stored and how will they be protected until placed back in service?

- Proposed use and description of work being performed:



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REMOVAL & ABATEMENT PLAN

Attach a copy of the following:

- Site map indicating tank location(s) and adjacent structures
- Written **Tank Removal & Abatement Plan**, to include:
 - Procedures for purging/cleaning (NFPA 326)
 - Vapor monitoring plan
 - Fire watch/fire protection measures
 - Excavation plan (if UST)
 - Disposal and transport plan
 - Emergency procedures
 - Verification of utility disconnection (if applicable)
 - Third-party environmental oversight plan (if required by NCDEQ)

COMPLIANCE REQUIREMENTS

This permit shall be carried out in compliance with:

- **North Carolina Fire Code** – Chapter 57
- **NFPA 1** – Fire Code
- **NFPA 30** – Flammable and Combustible Liquids Code
- **NFPA 326** – Tank Entry, Cleaning, and Removal
- **NC Department of Environmental Quality (NCDEQ)** – UST regulations
- **Local Building/Planning/Utility Requirements**

A pre-removal inspection by the Fire Marshal's Office is required. No work may begin until the permit is approved and posted at the work site.



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By my signature, I hereby certify that all information in this application is true and correct and that all work, structures, set ups and displays will comply with the North Carolina State Building Code and all other applicable local, state, and federal laws, ordinances, regulations, and codes. I will notify in writing and receive the approval of the Guil-Rand Fire Department Fire Marshal's Office before any changes are made to the project permitted herein. My signature gives consent for the Guil-Rand Fire Department Fire Marshal's Office and his representatives to enter this property for the purpose of conducting necessary inspections. I understand this permit is not transferable.

Signature of Applicant: _____ **Date:** _____

*Any Questions please contact the Guil-Rand Fire Department Fire Marshal's Office at:
(336) 431-2512*