



Village of Hewlett Bay Park

Village of Hewlett Neck

Village of Woodsburgh

30 Piermont Ave  
Hewlett, NY 11557  
Tel: (516) 295-1400 · Fax (516) 295-1406

**General Information for Oil Tank  
Abandonment**

- Complete Permit Application Package describing project as: **Abandon existing oil tank**
- Include copy of Nassau County Dept. of Health Tank Abandonment Notification Form and Letter of Affirmation of Non-Leaking Tank.
- Submit contractors' General Liability (Village to be named as Certificate Holder and Additionally Insured) and Workers' Compensation Insurance Certificate and valid Town of Hempstead, N. Hempstead or Oyster Bay Plumber's License.

**Fees:**

	<u>Hewlett Bay Park</u>	<u>Hewlett Neck</u>	<u>Woodsburgh</u>
Abandonment	\$150.00	\$150.00	\$150.00

\*Check made payable to the Village in which the work is being performed.

\*\* No work can start until a Permit is issued by the Village Building Department

**OIL TANK ABANDONMENT PERMIT APPLICATION**

DATE: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

VILLAGE OF \_\_\_\_\_

PERMIT # \_\_\_\_\_

30 Piermont Avenue Hewlett, NY 11557

FEE \$ \_\_\_\_\_

OWNER'S NAME	_____
OWNERS ADDRESS	_____ SBL: _____
OWNERS TEL # & EMAIL	_____

PLUMBER'S NAME \_\_\_\_\_

COMPANY NAME \_\_\_\_\_

COMPANY ADDRESS \_\_\_\_\_

EMAIL \_\_\_\_\_

TELE. # (BUS) \_\_\_\_\_ (CELL) \_\_\_\_\_

LIC. NO. T.O.H \_\_\_\_\_ T.N.H. \_\_\_\_\_ T.O.B. \_\_\_\_\_

Description of Work: \_\_\_\_\_

\_\_\_\_\_

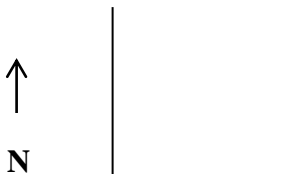
\_\_\_\_\_

Existing Tank Information:

Tank Size: \_\_\_\_\_ 275 \_\_\_\_\_ 550 \_\_\_\_\_ 1,000

Fill Material: \_\_\_\_\_ Sand \_\_\_\_\_ Concrete \_\_\_\_\_ Approved Foam

Tank Location Diagram:



**OWNER & PLUMBER** CERTIFIES THAT THE PROPOSED WORK COMPLIES WITH ALL OF THE PROVISIONS OF THE BUILDING ZONE ORDINANCE, BUILDING CODE (INCLUDING STATE BUILDING CONSTRUCTION CODE) AND ALL OTHER APPLICABLE STATUTES, ORDINANCES, RULES AND REGULATIONS.

**NO LICENSED PLUMBER SHALL SIGN A PLUMBING PERMIT OR ACT AS AN AGENT FOR A PERSON WHO IS NOT A LICENSED PLUMBER IN THE TOWNS OF HEMPSTEAD, N. HEMPSTEAD AND OYSTER BAY**

\_\_\_\_\_  
Print Name (Owner)

\_\_\_\_\_  
Print Name (Plumber)

\_\_\_\_\_  
Signature (Owner)

\_\_\_\_\_  
Signature (Plumber)

Sworn to before me this  
\_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

Sworn to before me this  
\_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
Notary Public, State of New York

\_\_\_\_\_  
Notary Public, State of New York

APPROVED BY BUILDING INSPECTOR: \_\_\_\_\_ DATE: \_\_\_\_\_

LAURA CURRAN  
NASSAU COUNTY EXECUTIVE



LAWRENCE E. EISENSTEIN, MD, MPH, FACP  
COMMISSIONER OF HEALTH

**NASSAU COUNTY DEPARTMENT OF HEALTH**

**BUREAU OF ENVIRONMENTAL PROTECTION  
AFFIRMATION OF NON-LEAKING TANK**

Re: \_\_\_\_\_

\_\_\_\_\_  
(Address)

I (we), \_\_\_\_\_ swear and affirm that I(we) own the above referenced property and that to the best of my(our) knowledge the underground tank and its associated piping used for storing oil solely for on-site space heating and/or water heating, located on this property, is not now leaking and has never leaked. **This form may not be used where there is any re-occurring accumulation of water in the tank.**

\_\_\_\_\_  
(Signature of Property Owner(s))

\_\_\_\_\_  
Affirmation must be received by NCDH seven (7) days prior to the date of the job.

Sworn to before me this

\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_  
date month year

**THIS FORM MUST BE SIGNED AND NOTARIZED BEFORE RETURNING VIA U.S. MAIL to the Nassau County Department of Health, Bureau of Environmental Protection, Att: Article XI, 200 County Seat Drive, Mineola, NY 11501. Telephone number: 516-227-9691.**



200 COUNTY SEAT DRIVE, MINEOLA, NEW YORK 11501  
Phone: 516-227-9692 Fax: 516-227-9613



Nassau County Department of Health  
Tank Abandonment/Removal\*  
Notification Form

Date of Job\*\* \_\_\_\_/\_\_\_\_/\_\_\_\_

**\*\*All notifications must be received by NCDH 7 days prior to the date of the job accompanied by a fee of \$220.00 per tank over 1,100 gallons and \$70.00 per tank 1,100 gallons or less abandoned in place or \$90.00 per tank 1, 100 gallons or less removed.**

Contractor \_\_\_\_\_

Phone # \_\_\_\_\_

Facility ID# \_\_\_\_\_

Facility Name: \_\_\_\_\_

Address \_\_\_\_\_

Village \_\_\_\_\_ Telephone \_\_\_\_\_

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**Existing Tank Information:**

Tank Size: \_\_\_\_\_ Tank Contents: \_\_\_\_\_

\_\_\_\_\_ Abandonment \_\_\_\_\_ Removal

Monitoring: \_\_\_\_\_ Well \_\_\_\_\_ Borings \_\_\_\_\_ Tested on \_\_\_\_/\_\_\_\_/\_\_\_\_

DEC Spill# (if applicable) \_\_\_\_\_

Other \_\_\_\_\_  
(explain)

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**New Installation:**

Tank Size \_\_\_\_\_ Plans Approved? \_\_\_\_\_

**Location:**

\_\_\_\_\_ Above ground on pad/containment

\_\_\_\_\_ Below ground

\_\_\_\_\_ Indoors

\_\_\_\_\_ Conversion to gas

\*All removals/abandonments, installations etc. must be done in accordance with Article XI of the Nassau County Public Health Ordinance. **This form is to be used for the abandonment of a fuel oil tank of more than 1,100 gallon capacity, the abandonment of any size non-fuel oil tank or the removal of any tank including fuel oil tanks of 1,100 gallon capacity or less.**

**PLEASE RETURN VIA U.S. MAIL to Nassau County Department of Health, Bureau of Environmental Protection, Article XI, 200 County Seat Drive, Mineola, N.Y. 11501.  
Telephone number: 516-227-9691.**

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Nassau County Department of Health  
Small Facility/Homeowner Tank Abandonment  
Notification Form

Date of Job \_\_\_\_/\_\_\_\_/\_\_\_\_

**\*\*All notifications must be received by  
NCDH 7 days prior to the date of the job  
accompanied by a fee of \$70.00 per tank.**

Contractor \_\_\_\_\_

Phone # \_\_\_\_\_

Name of Property Owner \_\_\_\_\_

Address \_\_\_\_\_

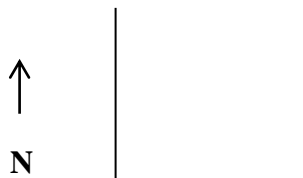
Village \_\_\_\_\_ Telephone \_\_\_\_\_

Existing Tank Information:

Tank Size:                    \_\_\_\_\_275                    \_\_\_\_\_550                    \_\_\_\_\_1,000

Fill Material:                    \_\_\_\_\_Sand                    \_\_\_\_\_Concrete                    \_\_\_\_\_Approved Foam

Tank Location Diagram:



New Installation:

<u>Tank Size</u>	<u>Location</u>
_____275	_____Above ground on pad/containment
_____550	_____Below ground
_____1,000	_____Indoors
	_____Conversion to gas

**\*\*All removals/abandonments, installations etc. must be done in accordance with Article XI of the Nassau County Public Health Ordinance. This form is to be used only when the individual storage tank capacity is 1100 gallons or less.**

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