



MISSOURI DEPARTMENT OF NATURAL RESOURCES
 HAZARDOUS WASTE PROGRAM
UNDERGROUND PETROLEUM STORAGE TANK REGISTRATION

FACILITY ID NUMBER ST

Return completed form to:
 Missouri Department of Natural Resources
 Hazardous Waste Program – Tanks Section
 P.O. Box 176
 Jefferson City, Mo 65102

Note to owners/operators: An instruction page is attached to assist you in completing the form. Use additional sheets for sites with more than five tanks and re-number the top column.

AGENCY USE ONLY
OWNER NUMBER
DATA ENTRY BY
DATE

OWNER INFORMATION

TANK OWNER NAME (CORPORATION, INDIVIDUAL, AGENCY, ETC)			
ADDRESS		TELEPHONE NUMBER WITH AREA CODE	
CITY	STATE	ZIP CODE	COUNTY
EMAIL ADDRESS		NAME OF PROPERTY OWNER	

OWNER TYPE

GOVERNMENT (CHECK ONE)
 Federal State Local Marketer County Private Owner School Hospital City

OPERATOR INFORMATION

OPERATOR NAME			
ADDRESS		TELEPHONE NUMBER WITH AREA CODE	
CITY	STATE	ZIP CODE	EMAIL ADDRESS

WHERE TO SEND REGISTRATION FEE INVOICES

CHECK ONE
 Owner Facility

FACILITY INFORMATION

FACILITY NAME		
911 ADDRESS (CANNOT BE A P.O. BOX)		
CITY	ZIP CODE	COUNTY

FACILITY CONTACT

FACILITY CONTACT PERSON	
JOB TITLE	TELEPHONE NUMBER WITH AREA CODE

OTHER INFORMATION

Is this facility currently registered as an underground storage tank facility? Yes No

FACILITY NUMBER ST	RELEASE NUMBER (IF APPLICABLE) R
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Are you amending the current registration? Yes No

NUMBER OF UNDERGROUND STORAGE TANKS AT THIS FACILITY

TANK INFORMATION	NO. 1	NO. 2	NO. 3	NO. 4	NO. 5
1. STATUS OF TANK (CHECK ONE)					
Currently in use					
Temporarily out of use					
Permanently closed in place					
Removed					
2. TANK CAPACITY (REQUIRED – A COMPARTMENTALIZED TANK COUNTS AS ONE TANK)					
If the tank has compartments, fill in size and contents using the abbreviations below. Example: 1,000 D. BD = Biodiesel D = Diesel (Heating Oil is Exempt) E = Empty E85 = Ethanol G = Gasoline Including Alcohol Blends JF = Jet Fuel K = Kerosene NO = New Oil UKO = Unknown/Other (Specify) UO = Used Oil UP = Unspecified Petroleum					
Tank size in gallons					
Compartment #1					
Compartment #2					
Compartment #3					
Compartment #4					
3. SUBSTANCE CURRENTLY OR LAST STORED					
A. PETROLEUM SUBSTANCES:					
Gasoline including alcohol blends					
Ethanol/E85					
Diesel (Heating oil is exempt)					
Biodiesel					
Unspecified petroleum					
New oil					
Used oil					
Jet fuel					
Kerosene					
Empty					
Unknown/other (Specify)					
B. HAZARDOUS SUBSTANCES					
Name of hazardous substance					
CERCLA name and/or CAS number					
Mixture of hazardous substances					
Unknown/other (Specify)					
4. PERMANENTLY CLOSED TANKS (COMPLETE ONLY IF TANKS HAVE BEEN REMOVED OR FILLED WITH SAND, GRAVEL, CONCRETE, ETC.)					
Date last used					
Date of closure notification					
Date of permanent closure					
5. DATE OF INSTALLATION (MM/DD/YY) (REQUIRED)					
Tank					
Piping					
6. TANK CONSTRUCTION MATERIAL (REQUIRED)					
Steel (includes bare, galvanized and asphalt coated steel tanks)					
Fiberglass reinforced plastic, or FRP					
Clad Steel (ACT-100©)					
Unknown/other (Specify)					
Double-walled (Y/N)					

TANK INFORMATION CONTINUED	NO. 1	NO. 2	NO. 3	NO. 4	NO. 5
7. TANK INTERNAL PROTECTION IF STEEL TANK <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> OTHER					
Date of lining installation					
Unknown/other (Specify)					
8. TANK EXTERNAL PROTECTION IF STEEL TANK					
Sacrificial					
Impressed					
N/A					
None					
Unknown/other (Specify)					
9. METHODS OF TANK RELEASE DETECTION (REQUIRED)					
Inventory control (Cannot be used on tanks over 10 years old)					
Automatic tank gauging					
Groundwater monitoring					
Vapor monitoring					
Interstitial monitoring (Requires double wall tank)					
Statistical inventory reconciliation					
Emergency generator					
Manual tank gauging					
Chemical marker tracer					
None					
Unknown/other (Specify)					
Date installed					
Manufacturer/model					
10. SPILL PROTECTION (REQUIRED)					
Spill bucket at fill pipe (Y/N)					
11. TYPE OF OVERFILL PROTECTION (REQUIRED)					
Automatic shutoff					
Ball float valve					
Alarm					
None required (fills of less than 25 gallons)					
None					

PIPING INFORMATION

12. PIPE CONSTRUCTION MATERIAL (MAY NOT APPLY TO USED OIL TANKS)

Steel					
Copper					
Fiberglass reinforced plastic, or FRP					
Flexible plastic piping					
Environ					
Double-walled (Y/N)					
Environ flex					
Combination					
ATP flex					
TC-Blue flex					
Other – meets upgrade					
Unknown/other (Specify)					
None					

13. PIPING PROTECTION (MAY NOT APPLY TO USED OIL TANKS)

Date installed					
Other – meets upgrade					
Impressed					
Sacrificial					
Above ground					
N/A					
Unknown/other (Specify)					

14. PIPING SYSTEM TYPE (MAY NOT APPLY TO USED OIL TANKS)

Pressurized					
Suction					
Gravity feed					
Safe suction					
Unsafe suction					
Manifold					

15. PIPE RELEASE DETECTION (PRESSURIZED SYSTEMS ONLY)

Automatic line leak detection – Check Mechanical (M) or Electronic (E). Also pick one of the below:	<input type="checkbox"/> M <input type="checkbox"/> E	<input type="checkbox"/> M <input type="checkbox"/> E	<input type="checkbox"/> M <input type="checkbox"/> E	<input type="checkbox"/> M <input type="checkbox"/> E	<input type="checkbox"/> M <input type="checkbox"/> E
Groundwater monitoring					
Vapor monitoring					
Interstitial monitoring					
Tightness test, or LTT					
Statistical inventory reconciliation, or SIR					
Emergency generator					
Unknown/other (Specify)					
None					
Manufacturer/model					

16. FINANCIAL RESPONSIBILITY METHOD USED TO SATISFY 10 CSR 20-11 (ATTACH A COPY)

A. Petroleum Storage Tank Insurance Fund.					
B. Financial Test of Self Insurance, 10 CSR 20-11.095.					
C. Insurance or risk retention group, 10 CSR 20-11.097.					
D. Local government mechanisms, 10 CSR 20-11.112 -.115.					
E. Other method (Specify).					
F. Exempt – State/federally owned tanks.					
G. Exempt – Tanks out of use before:					
1. 2/18/1994 – For local government owners.					
2. 8/30/1991 – For owners of 100 or more underground tanks or \$20 million net tangible worth.					
3. 12/31/1993 – For owners not included in #1 or #2 above.					

CERTIFICATION FOR NEW INSTALLATIONS, REPLACEMENT OR REPAIR

This section is required of all new installations, please select at least one item and **attach documentation**.

1. The installer has been certified by the tank and piping manufacturer.

YES NO

2. The installation has been inspected and certified by a registered professional engineer.

YES NO

3. All work listed on the manufacturer's installation checklists has been completed.

YES NO

4. INSTALLATION COMPANY

5. INSTALLER'S SIGNATURE

6. Date of installation

INSTALLER CERTIFICATION

INSTALLER INFORMATION		INSURER INFORMATION	
INSTALLER TYPE		INSURER NAME	
INSTALLER NAME		CONTACT	
CONTACT		ADDRESS	
ADDRESS		CITY	
CITY		STATE	ZIP
STATE	ZIP	TELEPHONE NUMBER WITH AREA CODE	
TELEPHONE NUMBER WITH AREA CODE		Attach additional sheets if necessary.	

ADDITIONAL INFORMATION

OWNER CERTIFICATION

I certify that I have examined the information reported on this form. I believe this information is true, accurate and complete.

TANK OWNER NAME (PLEASE PRINT)

TITLE

OWNER SIGNATURE

DATE

CERTIFICATION BY PARTY OTHER THAN TANK OWNER

I certify that I am not an owner of these tanks as defined by RSMo 319.100. However to facilitate the registration of these tanks, I am submitting this information which I believe to be true, accurate and complete to the best of my knowledge.

NAME (PLEASE PRINT)

TITLE

SIGNATURE

DATE

INSTRUCTIONS

Underground storage tanks that must be registered:

- All active underground storage tanks used to store petroleum products.
- All abandoned or inactive underground storage tanks used for storage of petroleum products.
- All active or inactive tanks that are used to store CERCLA - listed hazardous substances.

Note: an underground storage tank with compartments is considered one tank.

Owner Information

List the tank owner's name, valid mailing address, telephone number and email address. Include the county name. The property owner's name is to be included in this area as well. The registration form is invalid if it is signed by anyone other than the listed tank owner or the owners' authorized representative.

Owner Type

If the owner of the tank is a government entity, check the applicable box. All others should check a box that is non-government.

Operator Information

List the operator's name, valid mailing address, telephone number and email address.

Registration Fee Invoices

Indicate where the registration fee invoice is to be mailed.

Facility Information

The facility name should identify the business name and 911 street address if known (cannot be a P.O. Box). Include county name.

Facility Contact Person

Indicate the name, title and telephone number of the person capable of providing information as necessary.

Other Information

If this facility has previously registered underground storage tanks with the department and you are adding new underground tanks or amending the current information, list your storage tank number of the facility (if known) to avoid duplicating our records.

Tank Information

1. **Status of Tank:** Indicate the status of each tank. Tanks that have been abandoned or emptied, yet not closed, in accordance with 10 CSR 20-10, are considered temporarily closed.
2. **Tank Capacity and Substance:** List the maximum capacity and substance of each tank in total gallons using the abbreviations provided. Include any compartments (size and substance) if appropriate.
3. **Substance Currently or Last Stored:** Check the applicable substance for each tank or compartment. A complete list of the CERCLA-listed hazardous substances can be found in 40 CFR 302.4. Heating oil tanks are exempt.
4. **Permanently Closed Tanks:** Insert the date the tank was last used or closed. If you are unsure if closure is permanent, provide a description in the "Additional Information" section on the last page.
5. **Date of Installation for Tanks and Piping:** Insert the dates of installation. If exact dates are unknown, provide an approximate date of installation for both tank and piping (e.g., MM/YY).
6. **Tank Construction Material:** Check the appropriate box for each tank. Check yes or no if the tank is double-walled.
7. **Tank Internal Protection:** Complete if tank is steel. Insert the date of lining installation. If steel tank is not lined, specify under 'Other' what the internal protection is.
8. **Tank External Protection:** Complete if tank is steel. Check the appropriate box.
9. **Methods of Tank Release Detection:** Check the method of tank release detection. Insert the date the tank was installed and the manufacturer/model.

Note: Release detection is not required on emergency generator tanks. Inventory control/tightness test can only be used for 10 years after tanks are installed.

INSTRUCTIONS - CONTINUED

10. **Spill Protection:** Indicate if the tank has spill protection by checking yes or no.

11. **Type of Overfill Protection:** Check the appropriate overfill protection.

Piping Information

12. **Pipe Construction Material:** Check yes or no if the tank is double-walled. Check the construction material of the pipe. If 'Other-Meets Upgrade' is chosen, specify what the material is.

13. **Piping Protection:** Add the date of installation for the piping for each tank. Check the appropriate piping protection. If 'Other-Meets Upgrade' is chosen, specify what type of protection it is.

14. **Piping System Type:** Check the appropriate piping system type for each tank.

15. **Pipe Release Detection:** Check the appropriate box for line leak detection - M for Mechanical or E for Electronic. Check the method of pipe release detection for each tank. Insert the manufacturer/model information.

Note: Release detection is not required for emergency generator tanks.

Financial Responsibility

Check the appropriate box for the financial responsibility mechanism in place for each tank. Please attach a copy.

Certification for New Installations, Replacement or Repair

This section is to be completed for new tank installations and any upgrades or equipment added to an existing UST system.

Installer Certification

This section is to be completed by tank installer when installation of a tank or replacement or repair of a tank or tank equipment occurs.

Important:

Complete either **Owner Certification** or **Certification by Party Other Than Tank Owner**. The owner's signature is preferred. If not signed by the owner, please provide justification for certification by party other than the tank owner.

Additional Information

Use this space to provide any additional information regarding your tanks.

For additional information or assistance, contact the Hazardous Waste Program's Tanks Section at 573-751-6822.