



MISSOURI DEPARTMENT OF NATURAL RESOURCES  
HAZARDOUS WASTE PROGRAM

**NOTIFICATION**  
**INSTALLATION OF NEW UNDERGROUND STORAGE TANK SYSTEM**

Pursuant to 10 CSR 20-10.019,  
this notice must be submitted 14 days prior to installation to:

Missouri Department of Natural Resources  
Hazardous Waste Program  
Tanks Section  
P.O. Box 176  
Jefferson City, MO 65102  
Phone: 573-751-6822

<b>TANK OWNER NAME</b> (CORPORATION, INDIVIDUAL)	<b>FACILITY NAME</b> <input type="checkbox"/> NEW FACILITY <input type="checkbox"/> EXISTING FACILITY
CONTACT PERSON	PHYSICAL ADDRESS OF FACILITY
CONTACT'S EMAIL ADDRESS	CITY, COUNTY, ZIP CODE
MAILING ADDRESS	INSTALLER NAME
CITY, STATE, ZIP CODE	INSTALLER'S CONTACT NAME
TELEPHONE NUMBER WITH AREA CODE	TELEPHONE NUMBER WITH AREA CODE
EXPECTED DATE OF INSTALLATION	INSTALLER'S ON-SITE CONTACT TELEPHONE NUMBER
EXPECTED DATE TANKS WILL BE BROUGHT INTO USE	INSTALLER'S EMAIL ADDRESS

SIGNATURE (REQUIRED)

Owner  Operator  Installer

**Please notify the department at least 5 days prior to the installation  
so an inspector may be present to provide technical assistance during the installation.**

You may contact the installation inspection program at:

Phone: 573-522-5665 Fax: 573-526-5268 Email: [tanks-compliance@dnr.mo.gov](mailto:tanks-compliance@dnr.mo.gov)

**New Underground Storage Tank Information**

Tank ID	Tank Compartment	Capacity (in gallons)	Dimensions	Product	Material	Manufacturer
					<input type="checkbox"/> FRP <input type="checkbox"/> Clad Steel	
					<input type="checkbox"/> FRP <input type="checkbox"/> Clad Steel	
					<input type="checkbox"/> FRP <input type="checkbox"/> Clad Steel	
					<input type="checkbox"/> FRP <input type="checkbox"/> Clad Steel	
					<input type="checkbox"/> FRP <input type="checkbox"/> Clad Steel	
					<input type="checkbox"/> FRP <input type="checkbox"/> Clad Steel	
					<input type="checkbox"/> FRP <input type="checkbox"/> Clad Steel	
					<input type="checkbox"/> FRP <input type="checkbox"/> Clad Steel	

Piping material:  FRP  Semi-Rigid  Flexible Piping  Aboveground Steel  
 Manufacturer/Model or type:

Overfill device to be installed. Make/Model:  
 Automatic shutoffs/Flapper valves  Alarm audible in delivery area

Spill catchment basin(s) to be installed. Make/Model: Capacity:  
 Double wall  Single wall

Containment sump(s) to be installed. Manufacturer/Make/Model:  
 Double wall  Single wall

Compatibility - If storing alternative fuels (>E10 or B20), or hazardous substances, attach confirmation of system compatibility.

Primary tank release detection must be interstitial monitoring.

Interstitial monitoring  
 Manual interstitial monitoring-hazardous substance only  
 Electronic monitoring system to be installed  
 Manufacturer/model:  
 Probe/Sensor model(s):

Piping system will be:  Pressurized  Suction  
 Manifolder (indicate Tank IDs):  
 Safe suction, in accordance with 10 CSR 20-10.041(1)B2.

Automatic Line Leak Detector (required for all pressurized piping)  
 Electronic  
 Mechanical  
 Manufacturer/Model:

Primary precision piping release detection must be interstitial monitoring  
 Interstitial monitoring  
 Electronic monitoring/ sump sensor system installed  
 Manufacturer/model:

Please check **all** that apply:

- Will follow manufacturer installation practices
- Will follow other installation recommended practices  API RP1615  PEI RP100  PEI RP 1000 (Marinas)
- Other Please list:

Post-Installation testing will be conducted by (if not installation company):

- Spill buckets:
- Overfill prevention equipment:
- Containment sumps:
- Release detection equipment operability testing: