



Petroleum Bulk Storage Application

Pursuant to the Petroleum Bulk Storage Law,
Article 17, Title 10 of ECL; 6 NYCRR 612-614 and 6 NYCRR, Subpart 3674-2
(Please Type or Print Clearly and Complete All Items for Sections A & B)

Return Completed Form & Fees To:

CORTLAND COUNTY DEPARTMENT OF HEALTH
DIVISION OF ENVIRONMENTAL HEALTH
CORTLAND COUNTY OFFICE BUILDING
60 CENTRAL AVENUE
CORTLAND NEW YORK 13045

PBS Number:

Section A - Facility/Owner/Contact Information

Expiration Date:

<p>Transaction Type (Check all that apply) NOTE: Transaction Types 1, 2 and 5 may require a fee</p> <p><input type="checkbox"/> 1) Initial/New Facility</p> <p><input type="checkbox"/> 2) Change of Ownership</p> <p><input type="checkbox"/> 3) Tank Installation, Closing, Repair or Reconditioning</p> <p><input type="checkbox"/> 4) Information Correction</p> <p><input type="checkbox"/> 5) Renewal</p>	<p>F A C I L I T Y</p> <p>Facility Name: _____</p> <p>Location (Not P.O. Boxes) _____</p> <p>Location (cont.): _____</p> <p>City: _____ State: _____ Zip Code: _____</p> <p>County: _____ Township or City: _____</p> <p>Name of Daily On-Site Operator: _____ Training: <input type="checkbox"/> Facility Phone Number: _____</p> <p>Name of Primary Operator: _____ Training: <input type="checkbox"/> Primary Operator Phone: _____</p>	<p>O W N E R</p> <p>Owner Name: _____</p> <p>Address (Street and/or P.O.): _____</p> <p>City: _____ State: _____ Zip Code: _____</p> <p>Federal Tax ID Number: _____</p> <p>Owner Telephone Number: _____</p> <p>Check If Multiple Tank Owners: <input type="checkbox"/></p> <p>Type of Owner: <input type="checkbox"/> Local Government <input type="checkbox"/> Private Resident <input type="checkbox"/> Federal Government <input type="checkbox"/> State Government <input type="checkbox"/> Corporate/Commercial</p>	<p>C O R R E S P O N D E N C E</p> <p>Emergency Contact Name: _____ Emergency Telephone Number: _____</p> <p>I hereby certify under penalty of perjury that the information provided on this form is true to the best of my knowledge and belief. False statements made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.</p> <p>Name of Owner or Authorized Representative: _____ Amount Enclosed: _____</p> <p>Title: _____</p> <p>Signature: _____ * Date: _____</p>
<p>*Application will be returned if any of these items are blank -or- if submitted without original signature and date</p>	<p>Attention: _____</p> <p>Name of Company: _____</p> <p>Address: _____</p> <p>Address: _____</p> <p>City/State/Zip Code: _____</p> <p>Telephone Number: _____ Email Address: _____</p>	<p>TYPE OF PETROLEUM FACILITY (Check only one)</p> <p><input type="checkbox"/> 01=Storage Terminal/Petroleum Distributor</p> <p><input type="checkbox"/> 02=Retail Gasoline Sales</p> <p><input type="checkbox"/> 03=Other Retail Sales</p> <p><input type="checkbox"/> 04=Manufacturing</p> <p><input type="checkbox"/> 05=Utility</p> <p><input type="checkbox"/> 06=Trucking/Transportation</p> <p><input type="checkbox"/> 07=Apartment/Office Building</p> <p><input type="checkbox"/> 08=School</p> <p><input type="checkbox"/> 09=Farm</p> <p><input type="checkbox"/> 10=Private Residence</p> <p><input type="checkbox"/> 11=Airline/Air Taxi</p> <p><input type="checkbox"/> 12=Chemical Distributor</p> <p><input type="checkbox"/> 13=Municipality</p> <p><input type="checkbox"/> 14=Refinery</p> <p><input type="checkbox"/> 15=Railroad</p> <p><input type="checkbox"/> 25=Auto Service/Repair (No Gasoline Sales)</p> <p><input type="checkbox"/> 26=Religious (Church, Synagogue, Mosque, Temple, etc.)</p> <p><input type="checkbox"/> 27=Hospital/Nursing Home/Health Care</p> <p><input type="checkbox"/> 28=Cemetery/Memorial</p> <p><input type="checkbox"/> 99=Other (Specify): _____</p>	<p>OFFICIAL USE ONLY</p> <p>Date Received: ____/____/____</p> <p>Date Processed: ____/____/____</p> <p>Amount Received \$: _____</p> <p>Reviewed by: _____</p>

PBS Number:

Section B - Tank Information

(Please use the key located on the bottom of this sheet to complete each item/column.)

Registration Expiration Date:

TANK										PIPING				OTHER						
Number	Location	Installation or Permanent Closure Date (mm/dd/yyyy)	Capacity (Gallons)	Product Stored (If Gas with ethanol or biodiesel, list % additive.)	Type	Internal Protection	Secondary Containment	Leak Detection	Overflow Prevention	Spill Prevention	Dis-pen-ser	Loca-tion	Type	External Protection	Secondary Containment	Leak	Under Dispenser Containment (UDC)	Tank Owned By Party Other than Listed in Section A		
(1)	(2)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)	(20)	(21)	(22)	

Tank Product Stored (7)

- 1836 Turbine Oil
- 0308 Petroleum Grease
- 0001 #2 Fuel Oil
- 0002 #4 Fuel Oil
- 0259 #5 Fuel Oil
- 0003 #6 Fuel Oil
- 0012 Kerosene
- 0591 Clarified Oil
- 2711 Biodiesel (Heating)
- 2642 Used Oil (Heating)
- Motor Fuels
- 0009 Gasoline
- 2712 Gasoline/Ethanol
- 0008 Diesel
- 2710 Biodiesel
- 1044 Jet Fuel (Biofuel)
- 2641 Aviation Gasoline
- Crude Oil
- 0006 Crude Oil
- 0701 Crude Oil Fractions
- Lubricating/Cutting Oils
- 0013 Lube Oil
- 0015 Motor Oil
- 1043 Gear/Spindle Oil
- 0010 Hydraulic Oil
- 0007 Cutting Oil
- 0021 Transmission Fluid

Lab./Cut. Oils (cont)

- 0186 Turbine Oil
- 0308 Petroleum Grease
- Oils Used as Bldg Materials
- 2626 Asphaltic Emulsions
- 0748 Form Oil
- Petroleum Spirits
- 0014 White/Mineral Spirits
- 1731 Naphtha
- Mineral/Insulating Oils
- 0020 Insulating Oil (eg, Transformer, Cable Oil)
- 2630 Mineral Oil
- Waste/Used/Other Oils
- 0022 Waste/Used Oil
- 9999 Other - please list: *
- Tank Type (8)**
- 01 Steel/Carbon Steel/Iron
- 02 Galvanized Steel Alloy
- 03 Stainless Steel Alloy
- 04 Fiberglass Coated Steel
- 05 Steel Tank in Concrete
- 06 Fiberglass Reinforced Plastic (FRP)

Internal Protection (9)

- 00 None
- 01 Epoxy Liner
- 02 Rubber Liner
- 03 Fiberglass Liner (FRP)
- 04 Glass Liner
- 05 Other-please list: *
- External Protection (10/18)**
- 00 None
- 01 Painted/Asphalt Coating
- 02 Original Sacrificial Anode
- 03 Original Impressed Current
- 04 Fiberglass Jacketed
- 06 Wrapped (Piping)
- 07 Retrofitted Sacrificial Anode
- 08 Retrofitted Impressed Current
- 09 Urethane
- 99 Other-please list: *
- Secondary Containment (11/19)**
- 00 None
- 01 Diking (Aboveground Only)
- 02 Vault (w/access)
- 03 Vault (w/o access)
- 04 Double-Walled (Underground Only)

External Protection (10/18)

- 00 None
- 01 Interstitial Electronic Monitoring
- 02 Interstitial Manual Monitoring
- 03 Vapor Well
- 04 Groundwater Well
- 05 In-Tank System (Auto Tank Gauge)
- 06 Impervious Barrier/Concrete Pad (Aboveground Only)
- 99 Other-please list: *
- Tank Overfill Prevention (13)**
- 00 None
- 01 Float Vent Valve
- 02 High Level Alarm
- 03 Automatic Shut-off
- 04 Product Level Gauge (Aboveground Only)
- 05 Vent Whistle
- 99 Other-please list: *

Tank Spill Prevention (14)

- 00 None
- 01 Catch Basin
- 02 Transfer Station Containment
- 99 Other-please list: *
- Pumping/Dispensing Method (15)**
- 00 None
- 01 Submersible
- 02 Suction
- 03 Gravitly
- Piping Location (16)**
- 00 No Piping
- 01 Aboveground
- 02 Underground/On-ground
- 03 Aboveground/Underground Combination
- Piping Type (17)**
- 00 None
- 01 Steel/Carbon Steel/Iron
- 02 Galvanized Steel
- 03 Stainless Steel Alloy
- 04 Fiberglass Coated Steel
- 05 Steel Encased in Concrete
- 06 Fiberglass Reinforced Plastic (FRP)
- 07 Plastic

Tank Leak Detection (12)

- 05 Synthetic Liner
- 06 Remote Impounding Area
- 07 Excavation/Trench Liner System
- 08 Flexible Internal Liner (Bladder)
- 09 Modified Double-Walled (Aboveground Only)
- 10 Impervious Underlayment**
- 11 Double Bottom (Aboveground Only)
- Tank Leak Detection (12)**
- 00 None
- 01 Interstitial Electronic Monitoring
- 02 Interstitial Manual Monitoring
- 03 Vapor Well
- 04 Groundwater Well
- 07 Pressurized Piping Leak Detector
- 08 Tank Top Sump (Piping)
- 09 Exempt Suction Piping
- 99 Other-please list: *
- Under Dispenser Containment (UDC) - sump/containment underneath a motor fuel dispenser (21)**
- 00 None
- 01 Interstitial Electronic Monitoring
- 02 Interstitial Manual Monitoring
- 03 Vapor Well
- 04 Groundwater Well
- 07 Pressurized Piping Leak Detector
- 08 Tank Top Sump (Piping)
- 09 Exempt Suction Piping
- 99 Other-please list: *
- Under Dispenser Containment (UDC) - sump/containment underneath a motor fuel dispenser (21)**
- 00 None
- 01 Steel/Carbon Steel/Iron
- 02 Galvanized Steel
- 03 Stainless Steel Alloy
- 04 Fiberglass Coated Steel
- 05 Steel Encased in Concrete
- 06 Fiberglass Reinforced Plastic (FRP)
- 07 Plastic

Equivalent Technology

- 08 Equivalent Technology
- 09 Concrete
- 10 Copper
- 11 Flexible Piping
- 99 Other-please list: *
- Pipe Leak Detection (20)**
- 00 None
- 01 Interstitial Electronic Monitoring
- 02 Interstitial Manual Monitoring
- 03 Vapor Well
- 04 Groundwater Well
- 07 Pressurized Piping Leak Detector
- 08 Tank Top Sump (Piping)
- 09 Exempt Suction Piping
- 99 Other-please list: *
- Under Dispenser Containment (UDC) - sump/containment underneath a motor fuel dispenser (21)**
- 00 None
- 01 Steel/Carbon Steel/Iron
- 02 Galvanized Steel
- 03 Stainless Steel Alloy
- 04 Fiberglass Coated Steel
- 05 Steel Encased in Concrete
- 06 Fiberglass Reinforced Plastic (FRP)
- 07 Plastic

*If Other, please list on a separate sheet including Tank Number. **Each of these codes must be combined with code 01 or 06 to meet compliance requirements.