

Montana Petroleum Tank Release Compensation Board
Application for Voluntary Registration of Petroleum Storage Tanks
Form 1 –V

Form 1-V can be used by a petroleum storage tank owner/operator to voluntarily register a facility's petroleum storage tanks with the Petroleum Tank Release Compensation Board (Board) under Board Rule (ARM, 17.58.323). This form may only be used for one facility location containing petroleum storage tanks (aboveground or underground). If you own more than one tank facility, a separate Form 1-V must be filled out for tank(s) at each facility. Also, it is necessary to complete a new Form 1-V if there is a change in facility or tank ownership. Please type or print in ink. If you need assistance with completing this form, contact Board staff at (406) 444-9710.

Completion of this Form 1V does not infer that an owner or operator of a tank with a release at this facility is eligible for reimbursement. If a petroleum release occurs at this tank facility and release eligibility is desired, it will be necessary to complete and submit an Application for Release Eligibility (Form 1-R). Form 1-R is available from Board Staff.

A. TANK OWNER/OPERATOR INFORMATION -- Record owner and operator of petroleum storage tank(s) and piping for the facility.

Tank Owner Name	Tank Operator Name
Mailing Address	Mailing Address
City State Zip	City State Zip
Phone Number	Phone Number

B. FACILITY INFORMATION -- Record facility information.

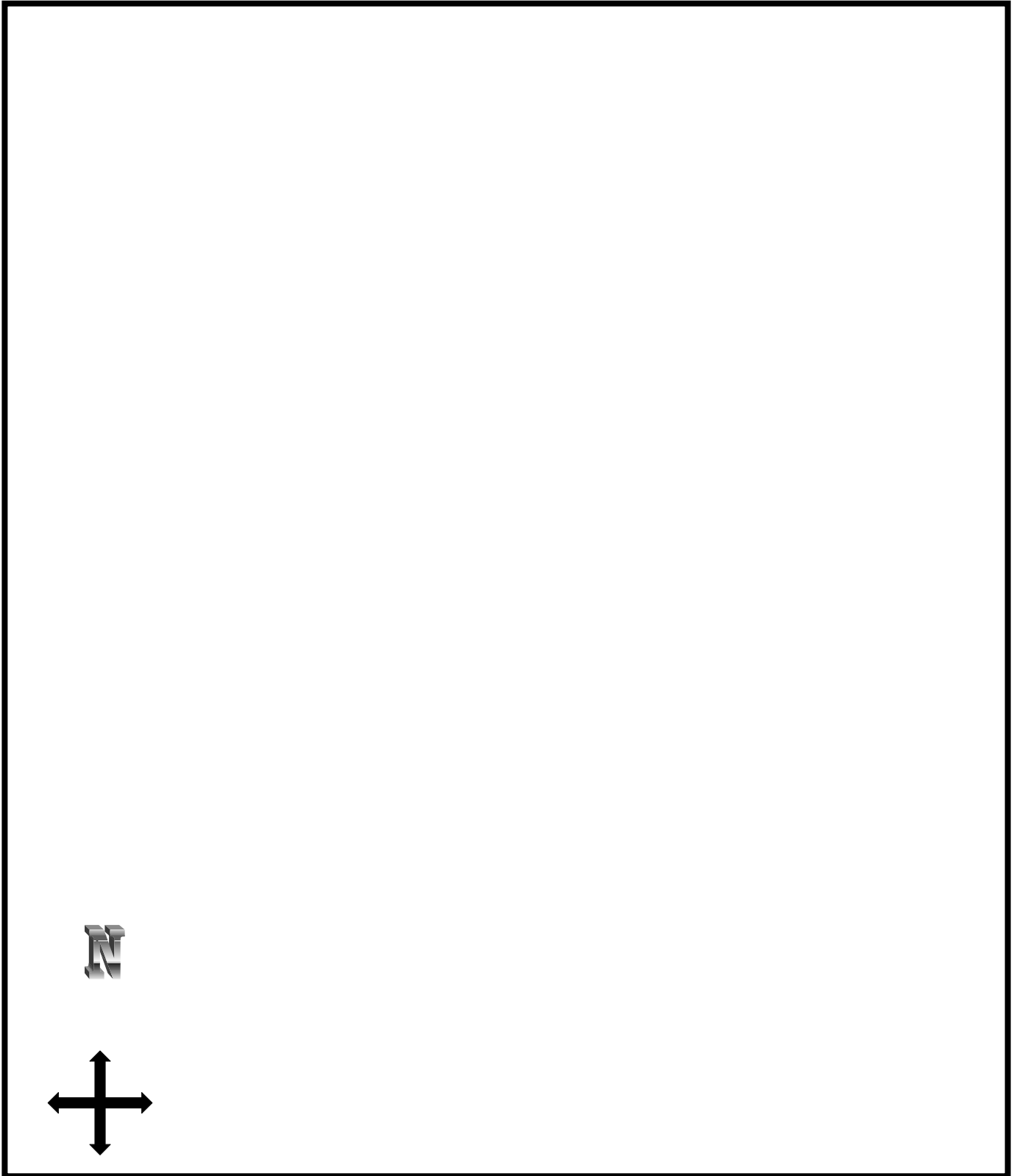
Facility Name	DEQ Facility Identification Number (Note: DEQ Facility Identification Number may not apply to aboveground storage tank facilities).	
Street Address (actual location)		
City	State	Zip

C. **DESCRIPTION OF TANKS AND PIPING** -- Complete this section for aboveground or underground petroleum storage tank system(s) (include attached piping) at the facility that you as the tank owner/operator want to register with the Board. Unlisted tanks will not be considered for registration. Only provide information on those tanks that are currently located on the premises, regardless of whether active or inactive. Submit additional pages if necessary.

Description of Tanks & Piping	#1	#2	#3	#4	#5
Tanks: Underground (U); Aboveground (A)					
Estimated Capacity (Gallons)					
Substance Currently or Last Stored - Gas (G); Diesel (D); Waste Oil (WO); Heating Oil (HO); Aviation (A) Other (O); If other, please specify in box					
Date Installed (Month/Year)					
Is the tank mobile and used to transport petroleum or petroleum products from one place to another? (Yes/No)	Y	Y	Y	Y	Y
	N	N	N	N	N
Is the tank located on a farm, ranch or residence? (Yes/ No)	Y	Y	Y	Y	Y
	N	N	N	N	N
Is the tank used to store fuel for any purpose other than resale? (Yes/No)	Y	Y	Y	Y	Y
	N	N	N	N	N
Is the tank used to store heating oil, which is consumed on the premises? (Yes/No)	Y	Y	Y	Y	Y
	N	N	N	N	N
Is the tank located at a refinery, terminal of a refiner or oil and gas production facility? (Yes/No)	Y	Y	Y	Y	Y
	N	N	N	N	N
Is the tank owned by or exclusively used by an agency of the federal government? (Yes/No)	Y	Y	Y	Y	Y
	N	N	N	N	N
Is the tank now or was it ever owned or under control of railroad? (Yes/No)	Y	Y	Y	Y	Y
	N	N	N	N	N
Is this property where tanks are/were located leased from a railroad? (Yes*/No)	Y	Y	Y	Y	Y
	N	N	N	N	N
Associated Piping: Underground (U);Aboveground (A)					

*If yes, copies of present and past leases, or other documentation deemed acceptable by Board staff that will indicate ownership records of tanks, must be included with this form.

D. FACILITY DIAGRAM – Provide a facility diagram including tank, locations, buildings, and other facility features.



E. CERTIFICATION

Have you, as the owner/operator of the tank that leaked, been convicted of a substantial violation of state or federal law or rule that relates to the installation operation, or management of petroleum storage tanks?

Yes

No

I, the owner or operator of this facility, certify the information contained within this form is true and correct. I fully understand that any fraudulent or erroneous information may jeopardize the voluntary registration of the tank(s).

Tank Owner or Operator Signature

Tank Owner or Operator name (Typed or printed)

Date

State of _____	
County of _____	
Signed and Sworn before me on _____ by _____	
(SEAL)	_____ Notary Public
	_____ Printed or typed
	Notary Public for the state of _____
	Residing at _____
	My Commission Expires _____

Submit completed form to:

**PETROLEUM TANK RELEASE COMPENSATION BOARD
PO BOX 200902
HELENA MT 59620-0902**