



## MINOR INSTALLATION PERMIT APPLICATION FOR UNDERGROUND STORAGE TANKS

### Facility Information

Facility Name:  
 Physical Address:  
 City: State: Zip:  
 Phone: Email:  
 Facility ID:

### Owner Information

Owner Name:  
 Facility Contact:  
 Mailing Address:  
 City: State: Zip:  
 Phone: Email:

Proposed Start Date: Licensed Installer(s):

The permit application review fee for a Minor UST Installation is **\$80 per permit**. Payment must be mailed to the DEQ UST Program via check or money order. Please contact us at **406-444-5300** with any questions (ARM 17.56.1304).

### Tank Tag No.

Substance Stored

Replace Spill Bucket	Single Wall	Double Wall	
Make and Model:			
Install Drop Tube Shutoff Valve			
Make and Model:			
Add External Overfill Alarm			
Make and Model:			
Install Autodialer (existing panel)			
Make and Model:			
Replace MLLD (does not apply to ELLD/PLLD)			
Make and Model:			
Install Drop Tube			
Remove Ball Float Vent Valve			
Boot Flex Connectors on			
Product		Vent Piping	
Install Boots or Offset Sleeves on:			
Tank Risers		Vent Risers	
Extend or Replace Vent Standpipe			
Repair or Replace Impressed Current Cable(s)			
Additional Make/Model or Notes:			
Dri-Sump VST Installation (site map required)			

**I certify that the information contained in this application is true and correct, and that I am authorized to request a permit for the proposed action(s).**

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant Printed Name: \_\_\_\_\_

I am the:      Owner                      Licensed Installer                      Representative of Licensed Installer

**Submit Completed Applications to:**  
[dequstprogram@mt.gov](mailto:dequstprogram@mt.gov)