



Pipe Installation Supplement B

Your application is not complete until **all** requested information is submitted. Please complete every item on this supplement to avoid delays in processing your request.

In addition to this form, please submit:

- Completed Permit Application for Underground Storage Tanks—Major Installation
- Permit fees
- Environmental Assessment Questionnaire (if required)
- Corrosion Protection Design Report (if required)

Check appropriate boxes for proposed installation

Tank Number	THIS LINE FOR OFFICE USE ONLY			
Tag Number (if applicable)				
Tank Capacity (gallons)				
Substance Stored				
Product Pipe Material	<input type="checkbox"/> Flexible <input type="checkbox"/> FRP <input type="checkbox"/> Steel with CP <input type="checkbox"/> Other _____	<input type="checkbox"/> Flexible <input type="checkbox"/> FRP <input type="checkbox"/> Steel with CP <input type="checkbox"/> Other _____	<input type="checkbox"/> Flexible <input type="checkbox"/> FRP <input type="checkbox"/> Steel with CP <input type="checkbox"/> Other _____	<input type="checkbox"/> Flexible <input type="checkbox"/> FRP <input type="checkbox"/> Steel with CP <input type="checkbox"/> Other _____
Product Pipe Construction	<input type="checkbox"/> Double-walled <input type="checkbox"/> Single-walled <input type="checkbox"/> Other _____	<input type="checkbox"/> Double-walled <input type="checkbox"/> Single-walled <input type="checkbox"/> Other _____	<input type="checkbox"/> Double-walled <input type="checkbox"/> Single-walled <input type="checkbox"/> Other _____	<input type="checkbox"/> Double-walled <input type="checkbox"/> Single-walled <input type="checkbox"/> Other _____
Pipe Manufacturer				
Type of Pipe	<input type="checkbox"/> Gravity <input type="checkbox"/> Pressurized <input type="checkbox"/> Safe Suction <input type="checkbox"/> U.S. Suction	<input type="checkbox"/> Gravity <input type="checkbox"/> Pressurized <input type="checkbox"/> Safe Suction <input type="checkbox"/> U.S. Suction	<input type="checkbox"/> Gravity <input type="checkbox"/> Pressurized <input type="checkbox"/> Safe Suction <input type="checkbox"/> U.S. Suction	<input type="checkbox"/> Gravity <input type="checkbox"/> Pressurized <input type="checkbox"/> Safe Suction <input type="checkbox"/> U.S. Suction
Leak Detection	Interstitial Monitoring <input type="checkbox"/> Continuous <input type="checkbox"/> Manual <input type="checkbox"/> Safe Suction (self-testing) <input type="checkbox"/> Tightness Test <input type="checkbox"/> Leak Detector <input type="checkbox"/> GW Monitoring <input type="checkbox"/> Vapor Monitoring <input type="checkbox"/> Other _____	Interstitial Monitoring <input type="checkbox"/> Continuous <input type="checkbox"/> Manual <input type="checkbox"/> Safe Suction (self-testing) <input type="checkbox"/> Tightness Test <input type="checkbox"/> Leak Detector <input type="checkbox"/> GW Monitoring <input type="checkbox"/> Vapor Monitoring <input type="checkbox"/> Other _____	Interstitial Monitoring <input type="checkbox"/> Continuous <input type="checkbox"/> Manual <input type="checkbox"/> Safe Suction (self-testing) <input type="checkbox"/> Tightness Test <input type="checkbox"/> Leak Detector <input type="checkbox"/> GW Monitoring <input type="checkbox"/> Vapor Monitoring <input type="checkbox"/> Other _____	Interstitial Monitoring <input type="checkbox"/> Continuous <input type="checkbox"/> Manual <input type="checkbox"/> Safe Suction (self-testing) <input type="checkbox"/> Tightness Test <input type="checkbox"/> Leak Detector <input type="checkbox"/> GW Monitoring <input type="checkbox"/> Vapor Monitoring <input type="checkbox"/> Other _____
Corrosion Protection	<input type="checkbox"/> Galvanic <input type="checkbox"/> Impressed Current <input type="checkbox"/> Non-corrodible	<input type="checkbox"/> Galvanic <input type="checkbox"/> Impressed Current <input type="checkbox"/> Non-corrodible	<input type="checkbox"/> Galvanic <input type="checkbox"/> Impressed Current <input type="checkbox"/> Non-corrodible	<input type="checkbox"/> Galvanic <input type="checkbox"/> Impressed Current <input type="checkbox"/> Non-corrodible
Vent Pipe Material	<input type="checkbox"/> Flexible <input type="checkbox"/> FRP <input type="checkbox"/> Steel with CP <input type="checkbox"/> Other _____	<input type="checkbox"/> Flexible <input type="checkbox"/> FRP <input type="checkbox"/> Steel with CP <input type="checkbox"/> Other _____	<input type="checkbox"/> Flexible <input type="checkbox"/> FRP <input type="checkbox"/> Steel with CP <input type="checkbox"/> Other _____	<input type="checkbox"/> Flexible <input type="checkbox"/> FRP <input type="checkbox"/> Steel with CP <input type="checkbox"/> Other _____
Sump/Disp Containment Manufacturer & Make/Model				

Yes No If this is not a new or replacement piping installation, are dispensers being replaced, OR significant modifications made to the concrete at the dispenser island OR is product piping repaired or replaced at an associated dispenser island as part of this permit application?

Yes No If yes to the above question, have you shown location of under dispenser containment that must include interstitial monitoring on site plan (may be manual or continuous interstitial monitoring)?

Design Checklist for proposed installation:

- Yes** Is 50% or more length of an existing piping run being replaced as part of this permit request?
NOTE: If yes, then entire length of product piping must be replaced with secondarily contained piping, liquid tight sumps at each piping end and employ Continuous Interstitial Monitoring.
- Make and model of all pressurized line leak detection equipment (for ELLD include series)
- MLLD _____ ELLD _____ LD panel _____
 How is the LD panel programmed? (indicate all)
 - 0.1 gph annual test 0.2 gph monthly test 3 gph continuous test
 - Sound a continuous alarm De-energize the turbine Autodialer
- Make and model of all interstitial piping leak equipment (sensor make and model)
- _____
 Length of pipe run protected by line leak detector for each tank system
- _____
 How do the liquid sensors stop the flow of fuel in the event of a leak?
 - Sound a continuous alarm De-energize the turbine
 - Close a solenoid at the tank top Autodialer
- Corrosion protection method for each metal component that will be in contact with the ground _____
- Make and model of any other equipment to be installed _____
- Length of each new vent piping run _____
- For connections to existing pipe, also describe and show on site plan:
 - Type of existing product pipes and method of connection _____
 - Total length of each new product piping run _____
 - Make/model of existing line leak detection equipment to be replaced _____
- Describe the project—what are you planning to do? (attach additional sheets if necessary). Include any special design issues and any information not included above. _____

Site Plan to include the following elements at a minimum:

- Facility name Scale or dimensions North arrow
- Major site features Direction of ground slope
- Adjacent water wells, public sewers, streams or bodies of water within 100 feet of installation
- Dimensioned or scaled distances between property lines, buildings, tanks and proposed pipe(s) installation

For each **existing** UST system, locate and label the following elements by dimension or scaled location:

- Tanks (AST and UST) Product Pipe(s)* Dispenser(s) Vent(s)*
- Sump(s)* Any vapor or groundwater monitoring wells (including remediation wells)

* Show only if any existing UST component requires disassembly or relocation

For each **proposed** UST system pipe install locate the following elements by dimension or scaled in place:

- Product pipe(s) Dispenser(s) Vent piping (if applicable) Sump(s)
- Leak detection monitoring equipment** Line leak detector if not installed in STP housing**
- All corrosion protection equipment associated with pipe install**
- Flex connectors and method of corrosion protection**
- If connecting to existing pipe made by a different manufacturer, show connection location and detailed cross-section
- For double-walled and/or suction pipe runs, show flow direction through the system and location of pipe sumps**

If installing a suction system, also include:

- Check valves** Solenoid valves** Product pipe cross-sections indicating direction and slope**

**Show relative location only (do not dimension or scale)

Environmental Assessment:

- | | Yes | No |
|---|--------------------------|--------------------------|
| 1. Is the depth to groundwater less than 50 feet below ground surface? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Is the distance to surface water less than 100 feet from the project boundary? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Is a domestic well located within 100 feet of the project boundary? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Is any portion of a public sewage system located less than 100 feet from the project boundary? | <input type="checkbox"/> | <input type="checkbox"/> |

If you answered yes to **any** of these questions, you must submit an Environmental Assessment Questionnaire with your permit application.