



Cheltenham Township
 8230 Old York Road
 Elkins Park, PA 19027-1589
 215-887-6200 x235
 215-887-1561 (fax)
 www.cheltenham-township.org

Cheltenham Township Tank Install/ Removal Application

INSTALL AND REMOVAL OF HAZARDOUS MATERIALS OR FLAMMABLE OR COMBUSTIBLE LIQUID STORAGE TANKS, DISPENSERS OR PIPING SYSTEMS

I. LOCATION

Address

II. PROPERTY/ BUSINESS OWNER

Name	Address
Phone #	City, State, Zip

III. CONTRACTOR

Name	
Address	Phone #
City, State, Zip	Fax #
DEP Reg #	Name on DEP Reg.

IV. APPLICANT SAME AS OWNER SAME AS CONTRACTOR

Name	Relationship to owner
Address	Phone #
City, State, Zip	Fax #

IV. SUBMITTAL REQUIREMENTS (Use page two or separate sheets)

1. Check one <input type="checkbox"/> INSTALL <input type="checkbox"/> REMOVAL <input type="checkbox"/> Check if more than one tank and specify number _____ (If more than one tank then plan must include all information for each)
2. Check one <input type="checkbox"/> ABOVE GROUND <input type="checkbox"/> BELOW GROUND
3. Size of tank _____ GALS
4. Last contents of tank. _____
5. Is tank subject to DEP regulation? <input type="checkbox"/> YES <input type="checkbox"/> NO (If yes provide documentation of DEP Filing)
5. (Removals) Is tank to be closed in place? <input type="checkbox"/> YES <input type="checkbox"/> NO (If yes provide details of proposed closure in place on page two)
6. Applicant will describe in enough detail scope of work (Use page two)
7. Provide site plan showing location of tank, associated piping, nearby structures, property lines, etc. (May be waived based on scope of work.)
8.(Removals) Will soil/ water samples be taken by the contractor? <input type="checkbox"/> YES <input type="checkbox"/> NO (If no provide name of third party) **On all non-regulated UST removals, at least one sample will be taken from below the tank and results furnished to the FMO**
9. Testing and acceptance methods and methodology.
10. Provide names of all subcontractors and their scope of work.
11 Provide names of testing agencies. (If applicable)
12. Provide names of independent consultant(s) (If applicable.)

All removals will conform to the 2009 IBC, 2009 IFC, Local Ordinances, State and Federal Requirements. It is the applicant's responsibility to notify and apply to all applicable agencies including PA One Call. The applicant is responsible for the safety of the site and integrity of any spoil pile. The Fire Marshal may require, at the applicant's expense, a third party review of the submittal.

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PROPOSED WORK

V. FEE	
<p>Combustible and Flammable Liquid Storage Tanks: <u>Install</u> of residential and commercial (each tank): 700 gals or less: \$50.00; 701 to 1000 gals: \$70.00; Over 1000 gals: \$70.00 plus \$20.00 for each additional 1000 gallons or fraction of. <u>Removal</u> (each tank): 1000 Gals or less: \$50.00; over 1000 gals: \$100.00.</p> <p>All other hazardous material storage tank installs or removals; Piping system installs, closure or modifications; Dispensers: See fee schedule A300-4.(2)(d)</p>	

Est. Cost of work: \$ _____	Permit fee: \$ _____
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VI. TOWNSHIP REVIEW		
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Permit #:		Reviewed By:	Approved By:
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Applicant Signature: _____ Date: ___/___/___

Print Name: _____

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