

UTAH COUNTY HEALTH DEPARTMENT

151 S. University Ave., Provo, Utah 84601 Phone 801-851-7525 Fax 801-851-7521

**APPLICATION FOR UNDERGROUND STORAGE TANK
INSTALLATION / CLOSURE / UPGRADE**

UST System Owner

Name: _____
Mailing address: _____
City: _____ State: _____ Zip: _____ Phone: _____

UST System Location

Facility Name: _____
Street Address: _____
City: _____ Zip: _____ Phone: _____ State ID# _____

Contractor

Business Name: _____ On-Site Contact: _____
Address: _____
City: _____ State: _____ Zip: _____ Phone: _____

TANKS

Note: Two or more siphoned or manifolded tanks are considered to be separate tanks. A compartmented tank is considered to be one tank.

New Installation (fee includes piping and associated leak and corrosion protection)

Number of tanks being installed _____ Fee: \$210.00 X _____ tank(s) = \$ _____

Closure

Number of tanks being closed _____ Fee: \$210.00 X _____ tank(s) = \$ _____

UPGRADES

Corrosion Protection

Tanks

- Lining
- Anode
- Impressed Current

Piping

- Non-Metallic
- Flex
- FRP
- Anode
- Impressed Current

Connectors

- Boots
- Anode
- Impressed Current

Spill Prevention

- Spill Bucket
- Containment Sump

Overfill Prevention

- Automatic Shutoff
- Ball Float Valve
- Overfill Alarm

Number of tanks receiving upgrades _____ Fee: \$85.00 X _____ tank(s) receiving upgrades = \$ _____

Applicant Signature _____ Anticipated Work Start Date _____

For UCHD Use

Total Fee Amount \$ _____ Collected By _____ Today's Date _____