



APPLICATION FOR FLUID STORAGE FACILITY

Form No. A4
Revised on 12/21/98

INDIANA DEPARTMENT OF NATURAL RESOURCES

Division of Oil and Gas
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Indianapolis, IN 46204
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FOR DIVISION OFFICE USE ONLY

Date received

Date to field

PART I GENERAL INFORMATION

Type of application (Check one) <input type="checkbox"/> Emergency overflow <input type="checkbox"/> Fluid storage <input type="checkbox"/> Burn off (See SPECIAL REQUIREMENTS)		Permit number
Name of operator		Telephone number
Address of operator (<input type="checkbox"/> Check here if this is a new address)		
City	State	Zip code

PART II LOCATION INFORMATION

Name of lease						
Section	Township	Range	¼	¼	¼	County
Name of person responsible for maintaining the facility					Telephone number	

PART III FACILITY INFORMATION

Section a		PITS				
Pit liner (Check one)						
<input type="checkbox"/> Plastic <input type="checkbox"/> Concrete or block (With sealant) <input type="checkbox"/> Compacted clay (Burn off pits only)						
Section b		TANKS				
Size of tanks		Number of tanks	Type of tanks			
<input type="checkbox"/> 50 bbl.	<input type="checkbox"/> 100 bbl.	<input type="checkbox"/> 210 bbl.	<input type="checkbox"/> Fiberglass	<input type="checkbox"/> Steel	<input type="checkbox"/> Wood	<input type="checkbox"/> Plastic
<input type="checkbox"/> 50 bbl.	<input type="checkbox"/> 100 bbl.	<input type="checkbox"/> 210 bbl.	<input type="checkbox"/> Fiberglass	<input type="checkbox"/> Steel	<input type="checkbox"/> Wood	<input type="checkbox"/> Plastic
<input type="checkbox"/> 50 bbl.	<input type="checkbox"/> 100 bbl.	<input type="checkbox"/> 210 bbl.	<input type="checkbox"/> Fiberglass	<input type="checkbox"/> Steel	<input type="checkbox"/> Wood	<input type="checkbox"/> Plastic
<input type="checkbox"/> 50 bbl.	<input type="checkbox"/> 100 bbl.	<input type="checkbox"/> 210 bbl.	<input type="checkbox"/> Fiberglass	<input type="checkbox"/> Steel	<input type="checkbox"/> Wood	<input type="checkbox"/> Plastic

PART IV AFFIRMATION

I affirm under penalty of perjury that the information provided in this report is true to the best of my knowledge and belief.	
Signature of operator or authorized agent	Date signed

SPECIAL REQUIREMENTS

1. Only those individuals whose signatures appear in PARTS V and VI of the Organizational Report may sign this form
2. You **must** obtain the approval of local fire authorities and the Indiana Department of Environmental Management before using a burn off pit.
3. Fluid storage pits **must** have a synthetic liner. Natural liners such as compacted clay are not allowed for fluid storage pits.
4. Tanks must be surrounded by an impermeable secondary containment dike that is capable of containing 1 1/2 times the capacity of the largest tank or tanks connected in series within the tank battery. NOTE: Secondary containment dikes may not be broken or breached and must be capable of containing fluids without significant leakage for a period of at least seventy-two (72) hours.
5. You **must** include a facility diagram with this application.

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PART V

FACILITY DIAGRAM



PARTS VI, AND VII FOR DIVISION USE ONLY

PART VI

FIELD REVIEW

Inspection checklist Evaporation Disposal Overflow Liner Vegetation/ debris Size Location
 Fluid Other (Explain)

Approved
 Denied

Reason (If denied)

Inspectors signature

Date signed

PART VII

OFFICE REVIEW

Approved Date
 Denied Date

By

Reasons denied (Check all that apply)

- | | | | |
|---|---|--------------------------------------|--|
| <input type="checkbox"/> Evaporation | <input type="checkbox"/> Vegetation/ debris | <input type="checkbox"/> Enforcement | <input type="checkbox"/> Liner |
| <input type="checkbox"/> Containment dike | <input type="checkbox"/> Improper fluid | <input type="checkbox"/> Overflow | <input type="checkbox"/> Leaking tanks |
| <input type="checkbox"/> Other (Explain) | | | |