



ENVIRONMENTAL HEALTH-UST PROGRAM

UST Installation/Upgrade/Repair Permit Application - \$391 Fee

Submit this document with plans, equipment specifications and fees to:

Southern Nevada Health District, Environmental Health-UST Program

330 S. Valley View Blvd., P.O. Box 3902, Las Vegas, NV 89127. Phone (702) 759-0603. Fax (702) 386-8540.

Keep a copy of this form available at the construction site.

FACILITY NAME:	Nevada Facility ID: 8-
FACILITY ADDRESS:	

Check all that apply:

<input type="checkbox"/> New UST System Installation (No. of Tanks:) *Clark County has 1,000 ft. set back policy from drinking water wells			
<input type="checkbox"/> Tank Replacement (No. of Tanks:)		<input type="checkbox"/> Tank Repair	
<input type="checkbox"/> Piping Replacement		<input type="checkbox"/> Dispenser Replacement	
<input type="checkbox"/> Leak Containment Sump installation @ Turbine		<input type="checkbox"/> Leak Containment Sump installation @ Dispenser	
<input type="checkbox"/> Leak Sensors installed or replaced		<input type="checkbox"/> Spill Bucket installation @ Fill tube	
<input type="checkbox"/> Tank Gauge & Monitor Replacement		<input type="checkbox"/> Booting installation	
<input type="checkbox"/> Corrosion Control	Tank <input type="checkbox"/> Yes <input type="checkbox"/> No	Piping <input type="checkbox"/> Yes <input type="checkbox"/> No	Both <input type="checkbox"/> Yes <input type="checkbox"/> No
	Impressed current <input type="checkbox"/> Yes <input type="checkbox"/> No	Galvanic anodes <input type="checkbox"/> Yes <input type="checkbox"/> No	

☐ Other repair or equipment retro fit (describe):

Pursuant to the State of Nevada Regulations (NAC 459.970 to .9729), when installation, repair or closure of a regulated UST, underground piping, and the risers connected to the UST for a fee, the work must be performed by, or under the supervision of a Nevada Certified UST Handler.

UST Contractor Company Name:	Phone:
Address:	

I hereby certify that I have reviewed this document and am responsible for the services described. I have reviewed all plans and specifications pertaining to these services and certify that all installation and inspection requirements from the manufacturers and nationally recognized UST codes will be complied with. I also agree to contact the District at least 48 hours in advance and be on site for final inspection of the above services. I will complete the "Contractor's Self Inspection Checklist" (and "Petroleum Environmental Contamination Statement") provided by the District and will sign and submit it to the District inspector during final inspection.

I am aware that Title 30, Table 30.44 Global Use of the Clark County Comprehensive Planning code has established a 1,000 foot set back for the installation of new UST systems in the vicinity of drinking water wells and the District requires more stringent "Secondary Containment and Continuous Leak Monitoring" Construction Standards* for UST systems that fall into the 1,000 foot radius.

Contractor Signature:	Date:
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(Please print and sign name.)

***SECONDARY CONTAINMENT & CONTINUOUS LEAK MONITORING Construction Standards**

- Double Walled Tanks with continuous interstitial (annular) leak sensors
- Double Walled Piping sloped and drained to the turbine leak containment sumps with continuous leak sensors
- Dispenser leak containment sumps with continuous leak sensors
- Fill Tube installed into leak containment sump with continuous leak sensors
- Tank monitor with audible and visual alarm located in close vicinity to staff.

If "SECONDARY CONTAINMENT AND CONTINUOUS LEAK MONITORING" Construction Standards are not used for new UST installation, then this document must be signed by a Nevada Certified Environmental Manager verifying that no drinking water wells are located within 1,000 feet of the proposed system.

Nevada Certified Environmental Manager name:
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I certify that I have surveyed the area of the proposed UST system listed on this document and no drinking water wells are located within the 1,000 foot set back radius of Title 30, Table 30.44 of the Clark County Comprehensive Planning Code.

Signature:	Date:
Certification No.:	Expiration Date: Phone:

Electrician Name:	Credentials:
Address:	Phone:

I certify that all electrical installation in all potentially explosive areas will conform with the Class I (Ignitable Gases and Vapors) requirements of the National Electric Code.

Signature:	Date:
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OTHER SIGNIFICANT AGENTS *(Complete as applicable.)*

Nevada Certified Tank Tester:
General Contractor:
Tank Manufacturer:
Piping Manufacturer:
Line Leak Detector Manufacturer:
Tank Gauge & Monitor Manufacturer:
Leak Sensor Manufacturer:
Booting Manufacturer:
Turbine Leak Containment Sump Manufacturer:
Dispenser Leak Pan Manufacturer:
Drop Tube Spill Bucket Manufacturer:
Overfill Prevention Device Manufacturer:
Impressed Current Rectifier Manufacturer:
Anode Manufacturer:
Corrosion System Designer:
Corrosion System Tester:
Tank Structural Assessor:
Tank Lining Company:
Coatings Expert:

UST Owner Name:
Address:

I agree to submit U.S. EPA Form 7530-1, Notification for Underground Storage Tanks to the District within 30 days of operation of the new UST system or for any changes to the data for existing UST systems. I will promptly notify the District upon my relinquishment as owner. I also certify that I am in compliance with the U.S. EPA and State of Nevada "Financial Responsibility" requirements for paying costs of cleaning up leaks and compensating third parties for bodily injury and property damage that may be caused by this UST system.

I certify that I will ensure that the construction, repairs and retrofits and operation of this UST system will be in compliance with U.S. EPA UST Code 40 CFR §280 and all pertinent Nevada Administrative Codes. I will also ensure that the operators of this UST system will be familiar with all leak detection, spill containment, overfill prevention and corrosion protection devices and that these devices will be maintained, operated, repaired, and calibrated in accordance with manufacturer's specifications and Federal and State performance standards.

I am aware that Title 30, Table 30.44 Global Use of the Clark County Comprehensive Planning code has established a 1,000 foot set back for the installation of new UST systems in the vicinity of drinking water wells and I will comply with the more stringent "Secondary Containment and Continuous Leak Monitoring" Construction Standards that the District requires for UST systems that fall into the 1,000 foot radius.

I will fully cooperate with the District for inspections, monitoring and testing, as well as requests for document submission pursuant to Section 9005 of Subtitle I of the Resource Conservation and Recovery Act. I further agree to hold the District harmless from claims, defense and legal cost, judgments for damages, or other relief against the District as a result of acts of omission by me or my representatives, in the performance of any activities permitted hereunder, whether the condition giving rise to the claim or judgment was created in whole, or in part by me or my representative.

Signature:	Date:
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(Please print and sign name)