



WARWICK TOWNSHIP
 Dept. of Planning & Zoning
 1733 Township Greene, Jamison, PA 18929
 Phone: (215) 343-6100
www.warwick-bucks.org

For Warwick Township Use Only

Check #:
Check Amount:
Received by:

ABOVE AND/OR UNDERGROUND TANK REMOVAL PERMIT APPLICATION

Permit #: _____

Site/Contact Information

Site Address:			Primary Contact Person (check one)
Circle one:	Above-ground tank	Under-ground tank	
Property Owner	Name	PA Contractor's #	<input type="checkbox"/>
	Address		
	Phone	Email	
Applicant	Name	PA Contractor's #	<input type="checkbox"/>
	Address		
	Phone	Email	
Contractor	Name	PA Contractor's #	<input type="checkbox"/>
	Address		
	Phone	Email	

Tax Parcel N° : 51- _____

Identify Product Stored in Tank:

Tank size, in gallons:

Brief Description of Project:

Pennsylvania Department of Environmental Protection Permit(s) attached: Approved: Yes
 No

Refer to the Pennsylvania Department of Environmental Protection website for more details.
<http://www.portal.state.pa.us/portal/server.pt?open=514&objID=589769&mode=2>

By signing this form, the applicant is certifying that he/she is empowered by the owner of the property to make an application on his/her behalf. The applicant also gives Warwick Township permission to access the property for all necessary inspections.

Signature of Applicant: _____ **Date:** _____

For Township Use Only:

Approval to schedule tank removal. Tank shall be accessible for inspection at scheduled inspection time.

Time and Date for Inspection

Fire Marshal, Warwick Township

I verify that I have inspected the storage tank located at the above referenced site in accordance with any and all Township regulations regarding storage tank removal.

Was provision made to dispose of Tank per DEP Regulations? _____

Was any soil contaminated? _____

Fire Marshal, Warwick Township

Approved: **Yes** **No** date: _____

Approved: **Yes** **No** date: _____

Approved: **Yes** **No** date: _____

Approved: **Yes** **No** date: _____



PLANNING FOR PERMANENT CLOSURE CHECKLIST UNDERGROUND STORAGE TANKS

- "Underground Storage Tank System Installation/Closure Notification Form" sent to appropriate DEP regional office with copy sent to Pennsylvania Department of Labor and Industry (or appropriate office in Philadelphia or Allegheny County) at least 30 days prior to initiating permanent closure."
- "Storage Tanks Registration/Permitting Application Form" submitted to appropriate DEP regional office, if the USTs are required to be registered and they are not."
- Pennsylvania "One-Call" contacted (800-242-1776) to have utilities mark their lines.
- Local municipality contacted to obtain any necessary permits or approvals for UST system closure.
- DEP certified installer hired to perform tank handling activities.
- Arrangements made for site assessment and laboratory analysis of samples collected.
- Material Safety Data Sheets (MSDS) obtained for all hazardous substances stored in the USTs to be closed.
- Arrangements made for treatment/disposal of any contaminated soils encountered.
NOTE: Unless this item is specified in the contract, it can remain a continuing burden of the owner/operator.
- "Storage Tanks Registration/Permitting Application Form" obtained to amend facility status and submit to the Division of Storage Tanks after UST system closure is performed.
NOTE: Unless an amended registration form is sent to the Division of Storage Tanks, Registration fees and USTIF billing will continue.