XINSURANCE®

8722 S. Harrison St. Sandy, UT 84070
P.O. Box 4439 Sandy, UT 84091
877-585-2853 • Fax 877-585-2854

STORAGE TANK AND PIPING

COMPLETE ONE FORM FOR EACH TANK (make photocopies if necessary).

General Information Proposed Effective Date: ____________________

Applicant's Name: ____________________

Applicant's Mailing Address: ____________________

City: ____________________ State: __________ Zip: ____________________

Email: ____________________ County: ____________________

Business Telephone Number: ( )____________________ Fax: ( )____________________

Tank Information

1. Has a contamination survey been performed on the property? ☐ Yes ☐ No

   If yes, furnish name and address of company providing service and furnish copy of survey report::

   ____

   ____

2. Claim History at this site / location:

   a. Any clean up losses in the past 3 years? ☐ Yes ☐ No

      If yes, explain: ____________________

   b. Are you aware of any incident, accident, or conditions that currently exist which may result in a loss or claim to be made against this site/location? ☐ Yes ☐ No

      If yes, explain: ____________________

3. Include a copy of the following reports, if applicable:

Copy of any site assessment or contamination monitoring program	Furnish details of operation of any ground water survey completed during the past 10 years
Latest Tank and Piping tightness test report	Soil Sample Report
Inspection of site/location report by Oil Co.	Environmental Study
City, County, State or Fire Dept. Report	Independent Contractor report of service

4. List the location owned or operated where underground tanks are located:

   a. Address: ____________________

      ____

   b. Number of underground storage tanks at this site: ____________________

   c. Number of above ground storage tanks at this site*: ____________________

      * An above ground tank supplement must be completed for each AGST site to be included for coverage.

   d. Do you own this site? ☐ Yes ☐ No

      i. If no, please identify name and address of property owner:

         Name: ____________________

         Address: ____________________

         ____

ii. If yes, do you lease or rent this site/location to an operator? ☐ Yes ☐ No

If you do, answer:

1. Operator's name: ____________________
2. How long has the operator leased or rented? ____________________

5. Use of property prior to current use by owner/operator: ____________________

____

6. Identify the area which best describes each site/location. Use separate sheet if necessary:

☐	Industrial
☐	Commercial
☐	Residential
☐	Rural
☐	Agricultural
☐	Other (please describe):

7. Describe immediate adjacent properties for each location. Use separate sheet if necessary:

a. North: ____________________

____

b. South: ____________________

____

c. East: ____________________

____

d. West: ____________________

____

8. Are the tanks and piping at this site currently in compliance with all federal and state regulations concerning leak detection, corrosion protection and spill/overflow prevention? ☐ Yes ☐ No

If no, please explain: ____________________

____

9. If the tanks and piping in operation at this site do not yet meet federal technical standards required by December 1998, describe the nature and time frame associated with your upgrade plans: ____________________

____

10. If tanks have been upgraded with interior lining or if tanks and piping have been retrofit with Cathodic Protection Systems, note what year each project was performed and also the type of reline material and length of reline warranty: ____________________

____

11. Indicate the size of each site/location (acreage, total sq. ft., front footage and depth of property):____________________

____

12. State the horizontal distance to the nearest surface water (stream, lake, pond, well, etc.) for each site/location:

____

13. Identify ground water level at each site/location: ____________________

14. Site/Location is known and operated as: ____________________

15. Site/Location Address: ____________________

16. Person to contact at this site:
    a. Name: ______
    b. Address: ______
    ______
    c. Telephone number: (______) ______
    d. Email: ______
17. Describe the present operations at this site (service station operations, mini-mart, auto repairs, etc.): ______
______
18. Does site/location have a groundwater monitoring program? ☐ Yes ☐ No
19. Describe in detail your inventory reconstruction of reports program for the site/location (i.e., manual, electronic, dip stick, meter, delivery, site, other, frequency per tank, how often, trend identifying procedures, etc.). Attach additional sheets if necessary: ______
______
______
20. Is a leak detection system now in place (e.g. monitoring wells, secondary containment, electronic monitors, etc.)? If yes, answer: ☐ Yes ☐ No
    a. What type of system: ______
    Manufacturer's Name: ______
    Service Contractor's Name: ______
    Address: ______
    Installer's Name: ______
    Address: ______
21. Describe the tanks at this site:

	TANK 1	TANK 2	TANK 3	TANK 4
Tank identification number (if any)				
Status of tank (mark all that apply)	☐ Currently in use ☐ Temporarily out of use ☐ Permanently out of use ☐ Brought into use after 5/8/86	☐ Currently in use ☐ Temporarily out of use ☐ Permanently out of use ☐ Brought into use after 5/8/86	☐ Currently in use ☐ Temporarily out of use ☐ Permanently out of use ☐ Brought into use after 5/8/86	☐ Currently in use ☐ Temporarily out of use ☐ Permanently out of use ☐ Brought into use after 5/8/86
How old is the tank - estimated age (years)				
Estimated total capacity (gallons)				
Type of fuel or product in tank (premium, regular, etc.)				
Construction of tank (mark one)	☐ Bare steel ☐ STI – PS ☐ Fiberglass reinforced plastic ☐ Fiberglass coated steel ☐ Epoxy Lined – Retro ☐ Other:	☐ Bare steel ☐ STI – PS ☐ Fiberglass reinforced plastic ☐ Fiberglass coated steel ☐ Epoxy Lined – Retro ☐ Other:	☐ Bare steel ☐ STI – PS ☐ Fiberglass reinforced plastic ☐ Fiberglass coated steel ☐ Epoxy Lined – Retro ☐ Other:	☐ Bare steel ☐ STI – PS ☐ Fiberglass reinforced plastic ☐ Fiberglass coated steel ☐ Epoxy Lined – Retro ☐ Other:

	TANK 1	**TANK 2**	**TANK 3**	**TANK 4**
Internal protection (mark all that apply)	☐ Cathodic protection ☐ Interior lining (i.e., epoxy resins) ☐ Other:	☐ Cathodic protection ☐ Interior lining (i.e., epoxy resins) ☐ Other:	☐ Cathodic protection ☐ Interior lining (i.e., epoxy resins) ☐ Other:	☐ Cathodic protection ☐ Interior lining (i.e., epoxy resins) ☐ Other:
External protection (mark all that apply)	☐ Cathodic protection ☐ Fainted (i.e., asphaltic) ☐ Fiberglass reinforced plastic coated ☐ Coated steel-buffhide ☐ None ☐ Other:	☐ Cathodic protection ☐ Fainted (i.e., asphaltic) ☐ Fiberglass reinforced plastic coated ☐ Coated steel-buffhide ☐ None ☐ Other:	☐ Cathodic protection ☐ Fainted (i.e., asphaltic) ☐ Fiberglass reinforced plastic coated ☐ Coated steel-buffhide ☐ None ☐ Other:	☐ Cathodic protection ☐ Fainted (i.e., asphaltic) ☐ Fiberglass reinforced plastic coated ☐ Coated steel-buffhide ☐ None ☐ Other:
Piping Construction	☐ Bare steel ☐ Galvanized steel ☐ Fiberglass reinforced plastic ☐ Black Iron ☐ Other :	☐ Bare steel ☐ Galvanized steel ☐ Fiberglass reinforced plastic ☐ Black Iron ☐ Other :	☐ Bare steel ☐ Galvanized steel ☐ Fiberglass reinforced plastic ☐ Black Iron ☐ Other :	☐ Bare steel ☐ Galvanized steel ☐ Fiberglass reinforced plastic ☐ Black Iron ☐ Other :
Additional information for tanks permanently taken out of service:				
Estimated date last used (mo/yr)				
Est. quantity of substance remaining (gal)				
Mark box if tank was filled with inert material (i.e., sand, concrete)	☐	☐	☐	☐
Was Tank installed by a certified installer? (yes/no)	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
Was Piping installed by a certified installer? (yes/no)	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
Does Tank have a spill/overflow protection? (yes/no) If yes, note type (i.e., auto shut-off 90-95%, Lipped Tank, etc.)	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
Leak detection system in effect	☐ Electronic ☐ Vapor well ☐ Sampling well ☐ In-Tank system ☐ None ☐ Other, state type:	☐ Electronic ☐ Vapor well ☐ Sampling well ☐ In-Tank system ☐ None ☐ Other, state type:	☐ Electronic ☐ Vapor well ☐ Sampling well ☐ In-Tank system ☐ None ☐ Other, state type:	☐ Electronic ☐ Vapor well ☐ Sampling well ☐ In-Tank system ☐ None ☐ Other, state type:
Does Tank have a corrosion protection system or service? (yes/no) If yes, note type (e.g. Fiberglass, Cathodic protection / Impressed current, Cathodic protection / Sacrificial, etc.)	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

	TANK 1	**TANK 2**	**TANK 3**	**TANK 4**
Date tank and piping was last tested				
Testing Frequency (annual, 3 years, other)				
Age of piping (years)				
Piping Leak Detection System now used. (i.e. redjacket, other)				
Secondary containment now used for each tank (i.e. DBL walled, fiberglass, vault, pit liner, other).				
Dispenser method (i.e. submersible, suction, gravity):				
Identify piping system corrosion protection installed. (i.e. fiber-glass, plastic coating, impressed current, sacrificial corrode, other):				