



Petroleum Storage Tank Bureau
 1301 Siler Road, Bldg. B
 Santa Fe, NM 87507
 (505) 476-4397
 (505) 476-4374 (fax)

**30-Day Notification Form
 for Installations,
 Modifications, and Repairs**

I. Date: _____ **II. Notification Type:** (Installation) (Modification) (Repair)

III. Contractor Information

Contractor Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip Code: _____

IV. Owner Information

Owner Name: _____ Owner ID: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip Code: _____

V. Facility Information

Facility Name: _____ Facility ID: _____

Address: _____ City: _____ Zip Code: _____

County: _____ Phone: _____

VI. Equipment Information

A. Tanks: (Aboveground) (Underground) (N/A; will not be installed, modified, or repaired.)

Tank#	Capacity	Material / Model (i.e. FRP, ACT-100, or Fireguard)	Content

B. Piping: (Fiberglass Reinforced Plastic) (Flexible) (Steel – Aboveground*) (Other*)
 (N/A; will not be installed, modified, or repaired.)

C. Release Detection for Tanks: (Automatic Tank Gauging System) (Interstitial Monitoring**)
 (Monthly Visual Inspection – AST only) (Other; i.e. SIR or Groundwater Monitoring)
 (N/A; will not be installed, modified, or repaired.)

D. Release Detection for Piping: (Annual Line Tightness Testing) (Annual Line Tightness Testing and automatic line leak detectors) (Interstitial Monitoring**) (Monthly Visual Inspection – AST only) (Other) (N/A; will not be installed, modified, or repaired.)

E. **Spill Containment Equipment:** (Spill Bucket) (Remote Fill Box) (Exempt) (N/A; will not be installed, modified, or repaired.)

F. **Overfill Prevention Equipment:** (Automatic Shutoff Device) (Ball Check Valve) (Hi-Level Alarm) (Exempt) (N/A; will not be installed, modified, or repaired.)

G. **Secondary Containment:** (Double-walled Tank) (Double-walled Pipe) (Concrete) (Earthen Dike with Geo-synthetic Liner) (Steel) (Vault - Concrete) (N/A; will not be installed, modified, or repaired.)

H. **Cathodic Protection System:** (Impressed Current System) (Sacrificial/Galvanic System) (N/A; will not be installed, modified, or repaired.)

I. **Under Dispenser Containment.** (N/A, will not be installed, modified, or repaired.)

1. Manufacturer:

2. Model Number:

(Note: All dispensers installed or replaced after **April 4, 2008** are required to have under dispenser containment. Any dispenser replaced after this date will need under dispenser containment if the installation of the dispenser requires the re-installation of the shear valve, flex connector, or associated underground pipe.)

VII. Additional Information on Project

Project drawings included with notification. (Yes) (No)

Tentative date that project will start: ()

VIII. Exemption of New UST Systems from Secondary Containment Requirements

(Yes) (No) The new UST system to be installed is not within 1000 feet of a community water system, potable drinking water well, or source water. The information and documentation required in 20.5.4.15.B NMAC will be submitted 30 days before the start of the installation.

XI. Signature

Owner's or Authorized Representative's Signature

Date

*(Only steel can be installed above ground, all other types of piping must be installed underground. Other material may be installed above ground only after approval is granted by the Bureau prior to installation.)

** (For underground tank systems installed after April 4, 2008 interstitial monitoring is the only method of release detection allowed, therefore, an Automatic Tank Gauging system must be installed.)
