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275 Harrison St  
 Anoka, MN 55303  
 Phone #763-576-2900

## Storage Tank Removal Permit Application

Date \_\_\_\_\_ Proposed Date to Start Work \_\_\_\_\_ Valuation: \$ \_\_\_\_\_

**TANK SITE:**

Company: \_\_\_\_\_ Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**CONTRACTOR:**

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Describe Work To Be Done \_\_\_\_\_  
 \_\_\_\_\_

**Application for tank removals must include the following information. If not applicable, write N/A. Incomplete information may result in plans/application being returned.**

	Tank #1	Tank #2	Tank #3	Tank #4
Capacity:	_____	_____	_____	_____
Product:	_____	_____	_____	_____
Age of Tank:	_____	_____	_____	_____

Describe vapor removal method: \_\_\_\_\_

Name of environmental company for soil testing: \_\_\_\_\_

Disposal site for tank(s): \_\_\_\_\_

Disposal site for sludge/product: \_\_\_\_\_

Disposal site for contaminated soil: \_\_\_\_\_

**In addition to the above information, also provide the following with your application:**

- Provide a sketch showing locations of tank(s), piping and utilities.
- Provide documentation of MNPCA notification.
- Provide documentation of MNPCA certification of company and supervisor.

**Tank Removal Inspections:**

- A pre-inspection will be made at the site prior to approval.
- Tanks shall be inspected before they are removed from the site.
- The open pit shall be inspected before refilling.

**NOTE:** Tanks shall be removed from the site as soon as possible, but no longer than 24 hours after they have been removed from the ground. Tanks must remain plugged after vapor removal.

I, the undersigned, do hereby agree to complete the above-described work according to all City codes, State Fire Codes, PEI, NFPA and other nationally recognized standards.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Email