Shoreline Fire Department
Dedicated to the Protection of Life and Property

RESIDENTIAL UST DECOMMISSION APPLICATION & PERMIT

PERMIT REQUIRED IN THE FOLLOWING LOCATIONS

PLEASE CHECK ONE: ___SHORELINE ___KENMORE ___LAKE FOREST PARK

> WHEN STAMPED "APPROVED TO PROCEED" THIS PERMIT IS VALID FOR THE DECOMMISSIONING OF ONE RESIDENTIAL HEATING OIL TANK OF 1100 GAL OR LESS. THIS PERMIT IS VALID FOR A PERIOD OF NOT MORE THAN SIX MONTHS FROM DATE OF APPROVAL. FEE OF $100.00 DUE PRIOR TO ISSUANCE.

TANK SITE COMPLETE ADDRESS _____

PROPERTY OWNER

NAME _____ PHONE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

CONTRACTOR (APPLICANT)

COMPANY NAME _____ EMAIL _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

ICC CERTIFICATE HOLDER NAME _____

ICC CERTIFICATE ISSUED/EXP DATE _____

ICC CERTIFICATE NUMBER _____

PLEASE NOTE HEATING OIL TANK DECOMMISSIONING MUST BE ACCOMPLISHED BY OR OVERSEEN BY A CURRENT HOLDER OF AN ICC DECOMMISSIONING CERTIFICATE. THE REVERSE SIDE OF THIS FORM SHALL BE FILLED OUT ON COMPLETION OF THE SITE WORK AND THIS FORM MAILED BACK TO THE SHORELINE FIRE DEPARTMENT WITHIN TWO WEEKS OF DECOMMISSIONING FOR THE PERMIT TO BE FINALED AND RECORDED.

FIRE DEPARTMENT USE ONLY

PERMIT # _____

PERMIT RECEIVED _____

CHECK # _____

APPROVED _____

Shoreline Fire Department Proudly Serves the Cities of Shoreline, Kenmore, Lake Forest Park and The Town of Woodway
Please Mail Payments & Permits to: Shoreline Fire Dept, Attn: Fire Marshal's Office, 17525 Aurora Ave N, Shoreline, WA 98133
Fire Marshal's Office: 206-533-6565 Main: 206-533-6500 www.shorelinefire.com

PERMIT NO: _____

SITE WORK

DATE DECOMMISSIONED _____

TANK SIZE _____

CHECK AS APPROPRIATE

- ❑ PUMP/RINSE & FILLED WITH INERT MATERIAL
  - o CEMENT SLURRY
  - o SAND
  - o FOAM
  - o OTHER _____
- ❑ PUMP, REMOVE, AND DISPOSE OF TANK
  - o TANK DISPOSAL LOCATION

    _____

LOCATION OF TANK IN REFERENCE TO HOUSE: (GIVE DIMENSIONS FROM HOUSE TO FILL PIPE BY REFERENCING SIDES OF HOUSE, PROPERTY LINES, AND OR CORNER POINTS)

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SITE DECOMMISSIONING NOTATIONS: (INCLUDE COMMENTS REGARDING OBSERVANCES MADE OF TANK CONDITION AND OR RECOMMENDED ADDITIONAL ACTION TO BE TAKEN BY PROPERTY OWNER)

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I, THE BELOW SIGNED CERTIFIED DECOMIMISSIONER, CERTIFY THE ABOVE INFORMATION TO BE TRUE.

SIGNATURE _____ DATE _____

PERMIT INSTRUCTIONS: COMPLETE FRONT SIDE OF ORIGINAL FORM, EMAIL FRONT SIDE TO CNICHOLL@SHORELINEFIRE.COM AND MAKE PAYMENT (CHECK). UPON RECEIPT OF RETURN EMAIL WITH "APPROVED TO PROCEED" STAMP, DECOMMISSION TANK. COMPLETE BACK SIDE OF FORM INCLUDING SIGNATURE. SUBMIT ORIGINAL COMPLETE FORM TO SHORELINE FIRE TO BE RECORDED.