

WESTCHESTER COUNTY DEPARTMENT OF HEALTH OFFICE OF ENVIRONMENTAL HEALTH RISK CONTROL

145 Huguenot Street, New Rochelle, NY 10801 914-813-5161

PBS No.	
3-	
Date	

PETROLEUM BULK STORAGE WORK PERMIT APPLICATION

FACILITY Name		TYPE OF WORK	TANK ID(s)		FEE (ea.)	TOTAL	
Address		Remove tank			200.		
City/Town/Village		Zip	Close tank in place			200.	
Contact Person Email		Telephone	Repair tank			145.	
CONTRACTOR Name		Recondition tank (relining)			145.		
Address		Repair/replace piping			100.		
City	State	Zip	Install aboveground tank	Quantity: Tank capacity (gallons):		145.	
Contact Person Telephone Email		Install underground tank	Quantity: Tank capacity (gallons):		145.		
 INSTRUCTIONS Identify existing tanks by PBS ID numbers as they appear on the PBS registration certificate. Indicate the contractor that will be responsible for writing the report required by the Department. The contractor must be familiar with PBS and environmental regulations. 		Install piping system			100.		
		Product Substitution			100.		
		Install non-stationary tank storage area	Quantity:		145.		
 Proof of worker's compensation and disability insurance or proof of exemption must be submitted with the application or application will be rejected. 			TOTAL FEE				

GENERAL INSTRUCTIONS. The Work Permit Application may be completed and submitted by the facility's contractor or by facility personnel. Mail the completed application together with proof of Worker's Compensation and Disability Insurance (forms DB120.1 and C105.2) and the appropriate fee to: Westchester County Department of Health, 7th Floor - Petroleum Bulk Storage Section, 145 Huguenot Street, New Rochelle, NY 10801.

Work permits are valid for 90 days from the issue date. Work must be completed by the Expiration Date listed on the permit. If work has not been completed, a new permit must be obtained. A new Work Permit Application must be filed to change or modify the Work Permit.

Work permits **are** required for the following types of work:

- Tank installation
- Tank closure
- Tank re-lining
- Installation of non-stationary tank storage area
- Piping repair
- Piping installation or replacement

Work permits **are not** required for the following types of work:

- Dispenser installation/replacement
- Cathodic protection system installation or repair
- Leak detection system installation or repair
- Overfill prevention installation or repair
- Bringing interstitial port to grade
- Catch basin installation
- Fill and vent replacement
- Product substitution (a site assessment may be required, contact the Department)
- Stage I/Stage II vapor recovery system installation or repair

Facility Information. Enter the name of the facility exactly as it appears on the Petroleum Bulk Storage Registration Certificate. Also enter the facility's PBS Number and the date in the labeled boxes at the upper right of the form.

Contractor Information. Enter the name of the contractor and their valid mailing address; including a contact person and their phone number. The contractor will be responsible for writing the tank closure reports and/or the tank/piping installation reports that are required by this Department. The contractor must be familiar with PBS and environmental regulations and must supply proof of Worker's Compensation and Disability Insurance.

Type of Work. Select the work to be performed at the site. If there is more than one type of work to be performed you may select as many different types of work as necessary on the same application form.

Tank ID(s). Enter the identification number of each tank as it appears on the facility's PBS registration certificate. There is space to enter up to four tank ID numbers on each line in the form. If you require more space for tank ID entries, please use additional forms and fasten them together. In the case of new installations, enter the quantity of tanks, piping systems, or non-stationary tank storage areas to be installed.

Fee. The fees are assessed per tank, piping system or non-stationary tank storage area.

Total Fee. Enter the total amount of fees for each line of the Type of Work performed, then add each line and enter the Total Fee in the box at the bottom of the column. Submit a check or money order payable to the Westchester County Department of Health. The Department will not accept cash or credit card payments. No refunds will be made for work not performed. If a new tank is being installed at a facility that holds a valid PBS registration, no additional registration fee for that tank is required.