



MISSOURI DEPARTMENT OF NATURAL RESOURCES  
 HAZARDOUS WASTE PROGRAM  
**PETROLEUM STORAGE TANK REGISTRATION**

FACILITY ID NUMBER  
 ST

Return completed form to:  
 Missouri Department of Natural Resources  
 Hazardous Waste Program - Tanks Section  
 P.O. Box 176  
 Jefferson City, MO 65102

Note to owners or operators: An instruction page is attached to assist you in completing the form.  
 Use additional sheets for sites with more than five tanks and re-number the top column.

**AGENCY USE ONLY**

OWNER NUMBER

DATA ENTRY BY

DATE

**OWNER INFORMATION**

TANK OWNER NAME (CORPORATION, INDIVIDUAL, AGENCY, ETC)

ADDRESS

CITY	STATE	ZIP	COUNTY
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TELEPHONE NUMBER WITH AREA CODE	NAME OF PROPERTY OWNER
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**OWNER TYPE**

GOVERNMENT (CHECK ONE)  
 FEDERAL  STATE  LOCAL  MARKETER  COUNTY  PRIVATE OWNER  SCHOOL  HOSPITAL  CITY

**WHERE TO SEND REGISTRATION FEE INVOICES**

CHECK ONE  
 OWNER  FACILITY

**FACILITY INFORMATION**

FACILITY NAME

STREET ADDRESS (CANNOT BE A P.O. BOX)

CITY	ZIP	COUNTY
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**FACILITY CONTACT PERSON**

FACILITY CONTACT PERSON

JOB TITLE	TELEPHONE NUMBER WITH AREA CODE
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**OTHER INFORMATION**

IS THIS FACILITY CURRENTLY REGISTERED AS AN UNDERGROUND STORAGE TANK FACILITY?  YES  NO

FACILITY NUMBER ST	RELEASE NUMBER (IF APPLICABLE) R
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AMENDING THE CURRENT REGISTRATION?  YES  NO

NUMBER OF UNDERGROUND STORAGE TANKS AT THIS FACILITY?

FACILITY ID NUMBER  
ST

TANK INFORMATION		NO. 1	NO. 2	NO. 3	NO. 4	NO. 5
<b>1. STATUS OF TANK: (CHECK ONE)</b>						
CURRENTLY IN USE						
TEMPORARILY OUT OF USE						
PERMANENTLY CLOSED IN PLACE						
REMOVED						
<b>2. TANK CAPACITY: (REQUIRED - A COMPARTMENTALIZED TANK COUNTS AS ONE TANK)</b>						
TANK SIZE IN GALLONS						
If the tank has compartments, fill in size and contents using the abbreviations below: (Example: 1,000 D) G = Gasoline Including Alcohol Blends E85 = Ethenol    D = Diesel (Heating Oil is Exempt) BD = Biodiesel    UP = Unspecified Petroleum    NO = New Oil UO = Used Oil    JF = Jet Fuel    K = Kerosene E = Empty    UKO = Unknown/Other (Specify)	Compartment #1					
	Compartment #2					
	Compartment #3					
	Compartment #4					
<b>3. SUBSTANCE CURRENTLY OR LAST STORED:</b>						
<b>A. PETROLEUM SUBSTANCES:</b>						
GASOLINE INCLUDING ALCOHOL BLENDS						
ETHANOL/E85						
DIESEL (HEATING OIL IS EXEMPT)						
BIODIESEL						
UNSPECIFIED PETROLEUM						
NEW OIL						
USED OIL						
JET FUEL						
KEROSENE						
EMPTY						
UNKNOWN/OTHER (SPECIFY)						
<b>B. HAZARDOUS SUBSTANCES:</b>						
NAME OF HAZARDOUS SUBSTANCE						
CERCLA NAME OR CAS NUMBER						
MIXTURE OF HAZARDOUS SUBSTANCES						
UNKNOWN/OTHER (SPECIFY)						
<b>4. PERMANENTLY CLOSED TANKS: (COMPLETE ONLY IF TANKS HAVE BEEN REMOVED OR FILLED WITH SAND, GRAVEL, CONCRETE, ETC.)</b>						
DATE LAST USED						
DATE OF CLOSURE NOTIFICATION						
DATE OF PERMANENT CLOSURE						
<b>5. DATE OF INSTALLATION: (MM/DD/YY) (REQUIRED)</b>						
TANK						
PIPING						
<b>6. TANK CONSTRUCTION MATERIAL: (REQUIRED)</b>						
STEEL INCLUDES BARE, GALVANIZED AND ASPHALT COATED STEEL TANKS						
FIBERGLASS REINFORCED PLASTIC (FRP)						
CLAD STEEL (ACT-100©)						
UNKNOWN/OTHER (SPECIFY)						
DOUBLE WALLED Y/N						

FACILITY ID NUMBER  
ST

<b>TANK INFORMATION CONTINUED</b>	<b>NO. 1</b>	<b>NO. 2</b>	<b>NO. 3</b>	<b>NO. 4</b>	<b>NO. 5</b>
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**7. TANK INTERNAL PROTECTION IF STEEL TANK:**  YES  NO  OTHER

DATE OF LINING INSTALLATION					
UNKNOWN/OTHER (SPECIFY)					

**8. TANK EXTERNAL PROTECTION IF STEEL TANK:**

SACRIFICIAL					
IMPRESSED					
PRESENT					
N/A					
NONE					
UNKNOWN/OTHER (SPECIFY)					

**9. METHODS OF TANK RELEASE DETECTION: (REQUIRED)**

INVENTORY CONTROL (CANNOT BE USED ON TANKS OVER 10YRS OLD)					
AUTOMATIC TANK GAUGING					
GROUNDWATER MONITORING					
VAPOR MONITORING					
INTERSTITIAL MONITORING (REQUIRES DOUBLE WALL TANK)					
STATISTICAL INVENTORY RECONCILIATION					
EMERGENCY GENERATOR					
MANUAL TANK GAUGING					
TRACER					
NONE					
UNKNOWN/OTHER (SPECIFY)					
DATE INSTALLED					

**10. SPILL PROTECTION: (REQUIRED)**

SPILL BUCKET AT FILL PIPE (Y/N)					
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**11. TYPE OF OVERFILL PROTECTION: (REQUIRED)**

AUTOMATIC SHUTOFF					
BALL FLOAT VALVE					
ALARM					
PRESENT					
NONE REQUIRED (FILLS OF LESS THAN 25 GALLONS)					
NONE					

**PIPING INFORMATION**

**12. PIPE CONSTRUCTION MATERIAL: (MAY NOT APPLY TO USED OIL TANKS)**

STEEL					
COPPER					
FIBERGLASS REINFORCED PLASTIC (FRP)					
FLEXIBLE PLASTIC PIPING					
ENVIRON					
DOUBLE WALLED Y/N					

FACILITY ID NUMBER  
ST

PIPING INFORMATION CONTINUED	NO. 1	NO. 2	NO. 3	NO. 4	NO. 5
<b>12. PIPE CONSTRUCTION MATERIAL: (MAY NOT APPLY TO USED OIL TANKS) (CONTINUED)</b>					
ENVIRON FLEX					
COMBINATION					
ATP FLEX					
TC-BLUE FLEX					
OTHER - MEETS UPGRADE					
UNKNOWN/OTHER (SPECIFY)					
NONE					
<b>13. PIPING PROTECTION: (MAY NOT APPLY TO USED OIL TANK)</b>					
DATE INSTALLED					
OTHER - MEETS UPGRADE					
IMPRESSED					
SACRIFICIAL					
CATHODIC					
ABOVE GROUND					
N/A					
UNKNOWN/OTHER (SPECIFY)					
<b>14. PIPING SYSTEM TYPE: (MAY NOT APPLY TO USED OIL TANK)</b>					
PRESSURIZED					
SUCTION					
GRAVITY FEED					
SAFE SUCTION					
UNSAFE SUCTION					
MANIFOLD					
<b>15. PIPE RELEASE DETECTION:</b>					
(PRESSURIZED SYSTEMS ONLY) AUTOMATIC LINE LEAK DETECTION <b>MECHANICAL OR ELECTRONIC (PICK ONE)</b> <b>(MUST ALSO PICK ONE OF THE BELOW)</b>	<input type="checkbox"/> M <input type="checkbox"/> E	<input type="checkbox"/> M <input type="checkbox"/> E	<input type="checkbox"/> M <input type="checkbox"/> E	<input type="checkbox"/> M <input type="checkbox"/> E	<input type="checkbox"/> M <input type="checkbox"/> E
GROUNDWATER MONITORING					
VAPOR MONITORING					
INTERSTITIAL MONITORING					
TIGHTNESS TEST (LTT)					
STATISTICAL INVENTORY RECONCILIATION (SIR)					
EMERGENCY GENERATOR					
UNKNOWN/OTHER (SPECIFY)					
NONE					

FACILITY ID NUMBER  
ST

PIPING INFORMATION CONTINUED	NO. 1	NO. 2	NO. 3	NO. 4	NO. 5
<b>16. FINANCIAL RESPONSIBILITY METHOD USED TO SATISFY 10 CSR 20-11 (ATTACH A COPY)</b>					
A. PETROLEUM STORAGE TANK INSURANCE FUND					
B. FINANCIAL TEST OF SELF-INSURANCE - 10 CSR 20-11.095					
C. INSURANCE OR RISK RETENTION GROUP - 10 CSR 20-11.097					
D. LOCAL GOVERNMENT MECHANISMS - 10 CSR 20-11.112-.115					
E. OTHER METHOD (SPECIFY)					
F. EXEMPT - STATE/FEDERALLY OWNED TANKS					
G. EXEMPT - TANKS OUT OF USE BEFORE:					
1. 2/18/1994 - FOR LOCAL GOVERNMENT OWNERS.					
2. 8/30/1991 - FOR OWNERS OF 100 OR MORE UNDERGROUND TANKS OR \$20 MILLION NET TANGIBLE WORTH.					
3. 12/31/1993 - FOR OWNERS NOT INCLUDED IN #1 OR #2 ABOVE.					

**CERTIFICATION FOR NEW INSTALLATIONS, REPLACEMENT OR REPAIR**

THIS SECTION IS REQUIRED FOR ALL NEW INSTALLATIONS. SELECT AT LEAST ONE ITEM AND **ATTACH DOCUMENTATION.**

1. THE INSTALLER HAS BEEN CERTIFIED BY THE TANK AND PIPING MANUFACTURER.

YES     NO

2. THE INSTALLATION HAS BEEN INSPECTED AND CERTIFIED BY A REGISTERED PROFESSIONAL ENGINEER.

YES     NO

3. ALL WORK LISTED ON THE MANUFACTURER'S INSTALLATION CHECKLISTS HAS BEEN COMPLETED.

YES     NO

4. INSTALLATION COMPANY

5. INSTALLER'S SIGNATURE

6. DATE OF INSTALLATION

**INSTALLER CERTIFICATION**

INSTALLER INFORMATION	INSURER INFORMATION
INSTALLER TYPE	INSURER NAME
INSTALLER NAME	INSURER CONTACT
INSTALLER CONTACT	INSURER ADDRESS
INSTALLER ADDRESS	INSURER CITY
INSTALLER CITY	INSURER STATE
INSTALLER STATE	INSURER ZIP
INSTALLER ZIP	INSURER TELEPHONE WITH AREA CODE
INSTALLER TELEPHONE WITH AREA CODE	ATTACH ADDITIONAL SHEETS IF NECESSARY

**ADDITIONAL INFORMATION****OWNER CERTIFICATION**

I certify that I have examined the information reported on this form. I believe this information is true, accurate and complete.

TANK OWNER NAME (PLEASE PRINT)

TITLE

OWNER SIGNATURE

DATE

**CERTIFICATION BY PARTY OTHER THAN TANK OWNER**

I certify that I am not an owner of these tanks as defined by RSMo 319.100. To facilitate the registration of these tanks, I am submitting this information, which I believe to be true, accurate and complete to the best of my knowledge.

NAME (PLEASE PRINT)

TITLE

SIGNATURE

DATE

## Petroleum Storage Tank Registration Instructions for Form 780-1706

Underground storage tanks that must be registered:

- All active underground storage tanks used to store petroleum products.
- All abandoned or inactive underground storage tanks used for storage of petroleum products.
- All active or inactive tanks that are used to store Comprehensive Environmental Response Compensation and Liability Act, or CERCLA, listed hazardous substances.

### Owner Information

List the tank owner's name, valid mailing address and telephone number. The property owner's name should go on the last line in this box. Note that the registration form is invalid if it is signed by anyone other than the listed tank owner or the owners' authorized representative.

### Owner Type

If the owner of the tank is a government entity, check the box that applies. All others should check the box that applies.

### Registration Fee Invoices

Indicate where the registration fee invoice is to be mailed.

### Facility Information

The facility name should identify the business name and the 911 street address if known (cannot be a P.O. Box).

### Facility Contact Person

Indicate the name, title and telephone number of the person capable of providing information.

### Other Information

If you have previously registered underground storage tanks at this facility and are adding new underground tanks, amending the current information, or registering aboveground tanks, please list your storage tank, or ST, number of the facility (if known) to avoid duplicating our records.

### Tank and Piping Information

1. Status of Tank: Check the appropriate box. Tanks that have been abandoned or emptied, yet not closed in accordance with 10 CSR 20-10 are considered temporarily closed.
2. Tank Capacity: Maximum capacity of each tank in gallons. Describe compartmentalized tanks (size of compartment, product, etc.) on the "Additional Information" section on the last page.
3. Substance Currently or Last Stored: Check the applicable substance for each tank or compartment. A complete list of the CERCLA-listed hazardous substances can be found in 40 CFR 302.4. Heating oil tanks are exempt.
4. Permanently Closed Tanks: Check the appropriate box. If you are unsure if closure is permanent, provide a description in the "Additional Information" section.
5. Date of Installation: If exact dates are unknown, please provide an approximate date of installation for both tank and piping (i.e., for example, MM/YY).
6. Tank Construction Material: Check the appropriate box.
7. Tank Internal Protection: Check the appropriate box.

8. Tank External Protection: Check the appropriate box.

9. Methods of Tank Release Detection: Check the appropriate box. Note that release detection is not required on emergency generator tanks. Inventory control/tightness test can only be used for 10 years after tanks are installed.

10. Spill Protection: Indicate yes or no.

11. Type of Overfill Protection: Check the appropriate overfill protection method.

12. Pipe Construction Material: Check the appropriate box. If the material is not listed, please describe the type of material.

13. Piping Protection: Check the appropriate box.

14. Piping System Type: Check the appropriate box.

15. Methods of Pipe Release Detection: Check the appropriate box. Automatic line leak detection requires additional method from list. Release detection is not required for emergency generator tanks.

16. Certification of Financial Responsibility: Check the appropriate box for the financial responsibility, or FR, mechanism in place for each tank. Please attach a copy.

Certification for New Installations: This section is to be completed for new tank installations and any upgrades or equipment added to an existing UST system.

Additional Information: Use this space to provide any additional information regarding your tanks.

Installer Certification: This section is to be completed by tank installer when installation of a tank or replacement or repair of tank or tank equipment occurs.

**Important:**

Complete either Owner Certification or Certification by Party Other Than Tank Owner. The owner's signature is required. If not signed by the owner, please provide justification for certification by party other than the tank owner.

**For more information or assistance, contact the Hazardous Waste Program's Tanks Section at 573-751-6822.**