

**SAN BERNARDINO COUNTY FIRE DEPARTMENT
OFFICE OF THE FIRE MARSHAL
UNDERGROUND STORAGE TANK PROGRAM
SUBMITTAL CHECKLIST**

NEW UNDERGROUND STORAGE TANK INSTALLATION

GENERAL REQUIREMENTS

1. ☐ UST Modification Permit Application (separate form)
2. ☐ Payment (all operating fees must be current)
3. ☐ Plans/Scope of Work (3 set minimum)
4. ☐ Contractor/Technician Certifications and Manufacturer Certifications (1 set) ¹

REQUIREMENTS FOR PLANS AND SCOPE OF WORK

1. ☐ Project name, street address and city
2. ☐ Project contact name, address, and phone number (Architect & Contractor, as applicable)
3. ☐ Site Plan - overview of site with cross streets, driveways and flow of traffic, north arrow, property boundaries, and surrounding buildings.
4. ☐ UST locations, dispensers, piping shall also be depicted as accurately as possible
5. ☐ Complete Scope of Work
6. ☐ Drawings of components to be modified or installed
7. ☐ Specification sheets or component list that includes manufacture, model number, quantity and key to location shown on plans

CONTRACTOR/TECHNICIAN CERTIFICATIONS

1. ☐ Contractors State License Board (CSLB) license ¹
2. ☐ Certificate of Liability Insurance - Workers Compensation and Employers' Liability
3. ☐ International Code Council (ICC) UST Installation/Retrofitting
4. ☐ ICC CA UST Service Technician
5. ☐ Manufacturer Certifications applicable to monitoring system being installed
6. ☐ Manufacturer Certifications for each component to be modified or installed
 - Example A: UST installation certifications (e.g. Xerxes, Modern Welding, Containment Solutions, etc.)
 - Example B: UST piping installation certifications (e.g. NOV Fiber Glass Systems, Western Fiberglass products, FLEX-ING™ for FIREFLEX Flexible Connectors etc.)
 - Example C: UST monitoring systems certifications (e.g. Veeder Root, Pneumercator, etc.)

These are the minimum general requirements for installation plan check submittal. Additional requirements may be required upon plan check review.

¹ http://sbcfire.org/hazmat/forms/20090501_sbcfire_verifying_UST_contractor_licensing2009.pdf



SAN BERNARDINO COUNTY FIRE PROTECTION DISTRICT

598 S Tippecanoe Ave. • San Bernardino, CA 92415-0153 • (909) 386-8401 • Fax (909) 386-8460

UNDERGROUND TANK CONSTRUCTION / MODIFICATION APPLICATION

JOB LOCATION

Facility Name	Owner Representative	Phone Number	E-mail
Site Address		City	Zip Code

CONTRACTOR

Company Name	Contact Person	Phone Number	E-mail
Mailing Address		City	Zip Code

ENGINEER/ARCHITECT

Company Name	Contact Person	Phone Number	E-mail
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NATURE OF WORK

All fees listed below are for FY 2026-2027

Modification/Repair WITHOUT Excavation (Minor) – 1 Inspection Only (\$550.00)

- ☐ Dispenser Upgrade ☐ Secondary Containment Repair w/o excavation ☐ Overfill ☐ Change of Fuel Type w/o excavation
☐ Other Minor:

Modification/Repair WITH Excavation (Major) – Up to 4 Inspections (\$2,055.00)

- ☐ Tank Top Upgrade ☐ Secondary Containment Repair w/excavation ☐ Re-pipe
☐ Other Major:

Installations – Up to 4 Inspections (\$4,084.00)

- ☐ New Construction # of Tanks: _____ Alternative Fuels? ☐ Yes ☐ No
☐ Install (addition) # of Tanks: _____ Alternative Fuels? ☐ Yes ☐ No

Removal (1st tank = \$634.00 + \$164.00 per each additional tank) Closed in Place (\$1,328.00 per tank)

- ☐ Removal # of Tanks Removed: _____

- ☐ Closed in Place # of Tanks Closed In Place: _____

Special Inspections / Plan Submittals /Permit Renewal ☐ Construction Extension - 3 Months (\$288.00) ☐ Permit Renewal (Original Permit Fee)

- ☐ Resubmittal (\$385.00) ☐ Consultation Fee (\$174.00/hr) ☐ Special Inspection (\$174.00/hr) ☐ Temporary Closure (\$739.00)
☐ After-Hours Inspection (\$651.00 per 1st 3hrs + \$217.00 per each additional hr) ☐ Failure to Keep Appointment (\$174.00/appt) Cold Start (\$370.00)
☐ Exploratory Permit w/excavation ☐ Initial Permit (\$2,055.00) ☐ Exploratory Permit w/o excavation ☐ Initial Permit (\$550.00)

- ☐ Other:

ADDITIONAL INFORMATION

- Is this work compliance driven? ☐ No ☐ Yes Date of inspection: _____
Is this an As-Built? ☐ No ☐ Yes Date Authorized: _____ Inspector Name: _____

Name of Person Submitting Plans	Phone
Signature	Date

OFFICE USE ONLY

Facility ID#: FA _____ ☐ New Facility ☐ Permitted Facility ⇒ Expiration Date: _____ Permits Current? ☐ Yes ☐ No # Regular UST(s): _____ # Complex (VPH) UST(s): _____ Service Request #: SR _____	CC Confirmation #: _____ Permit Fee Paid: \$ _____ Receipt Number: _____ Check Number: _____ Date Paid: _____ Failure to apply for a permit? ☐ No ☐ Yes Work without approved permit? ☐ No ☐ Yes Received By: _____
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UST Owner Acknowledgement

OWNER		
Owner Name		
Owner Mailing Address	City	Zip Code

FACILITY		
Facility Name		
Facility Address	City	Zip Code

CONTRACTOR		
Contractor Name		

SUMMARY OF THE SCOPE OF WORK		

The Contractor listed above has been hired to conduct the work in the Summary of the Scope of Work for the facility listed above.

Print Name

Title

Signature

Date



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UST Contractor Acknowledgement

CONTRACTOR		
Contractor Name		
Contractor Mailing Address	City	Zip Code

FACILITY		
Facility Name		
Facility Address	City	Zip Code

OWNER		
Owner Name		

SUMMARY OF THE SCOPE OF WORK		

We have been contracted by the Owner listed above to conduct the work in the Summary of the Scope of Work for the facility listed above.

Print Name

Title

Signature

Date