

San Bernardino County Fire Protection District • Hazardous Materials Section 598 S. Tippecanoe Ave., San Bernardino, CA 92415-0153 • (909) 386-8401; FAX (909) 386-8460

www.sbcfire.org

PERMIT APPLICATION

	ILICATION		See attached form
OWNER INFORMATION			
Name			
Address			
City		State	Zip Code
Phone	1		Ext.
FACILITY INFORMATION		FA#	
Business Name		CERS I	D:
Site Address			
City		State	Zip Code
Business Phone			Ext.
Business Operator Name			
Operator Phone			Ext.
FACILITY MAILING ADDRESS			
Mailing Address			
City		State	Zip Code
BILLING CONTACT			
Billing Contact Name			
Email	Phone		Ext.
Address	-		
City		State	Zip Code
ENVIRONMENTAL CONTACT			
Name			
Email	Phone		Ext.
Non-CERS fields			
Facility Email (optional)			
Local Facility Phone (optional)			Ext.
Signature Prin	nt Name	ı	Title
☐ Establish my facility in CERS and assign the enviro	nmental contact listed abo	ve as the	initial lead user.
Date:			



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 No.	E-mail
Site Address		City	Zip Code
	<u>CO</u>	NTRACTOR	
Company Name	Contact Person	Phone No.	E- Mail
Mailing Address	511611	City	Zip Code
	ENGINI	EER/ARCHITECT	
Company Name	Contact Person	Phone No.	E- Mail
Company Name	Contact Person	Priorie No.	E- IVIAII
		JRE OF WORK below are for FY 2025-2026	
Modification/Repair WITHOUT Excava			
☐ Dispenser Upgrade ☐ Secondary	· · · · · · · · · · · · · · · · · · ·	• •	uel Type w/o excavation
☐ Other Minor:	•	_	
Modification/Repair WITH Excavation			
☐ Tank Top Upgrade ☐ Second	lary Containment Repair w/e	excavation \square Re-pipe	
☐ Other Major:			
Installations – Up to 4 Inspections (\$3,96			
☐ New Construction # of Tanks		ive Fuels? ☐ Yes ☐ No	
☐ Install (addition) # of Tanks	: Alternat	ive Fuels? Yes No	
Removal (1st tank = \$616.00 + \$160.00 per each a	dditional tank) Closed In Place	(\$1,290.00 per tank)	
\square Removal # of Tanks Removed:			
☐ Closed in Place # of Tanks Closed In P			
Special Inspections / Plan Submittals /F			e e
		Special Inspection (\$169.00/hr)	☐ Temporary Closure (\$718.00)
☐ After-Hours Inspection (\$633.00 per 1 st 3	hrs + \$211.00 per each additional hr)	☐ Failure to Keep Appointment (\$169.0	0/appt) Cold Start (\$360.00)
☐ Exploratory Permit w/excavation	☐ Initial Permit (\$1,996.00)	☐ Exploratory Permit w/o	excavation ⇒ ☐ Initial Permit (\$534.00)
,		,	,
☐ Other:			
	ADDITION	IAI INEODAATION	
Is this work compliance driven?		IAL INFORMATION	
Is this an As-Built?			
Name of Person Submi	tting Plans		Phone
Signature			Date
	OFF	ICE LISE ONLY	
OFFICE USE ONLY			
Facility ID#: FA		CC Confirmation #:	
_		,	
□ New Facility		Permit Fee Paid: \$	Receipt Number:
☐ Permitted Facility ⇒ Expiration Date: Permits Current?	 □ Yes □ No	Check Number:	Date Paid:
# Regular UST(s):	□ 1€3 □ INU		
# Complex (VPH) US	JT(s):	Failure to apply for a permit? No Work without approved permit? No	☐ Yes ☐ Yes
			⊔ 1€3
Service Request #: SR		Received By:	



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UST Owner Acknowledgement

	OWNER	
Owner Name		
Owner Mailing Address	City	Zip Code
		l
	FACILITY	
Eacility Namo		
Facility Name		
Facility Address	City	Zip Code
	CONTRACTOR	
Contractor Name		
Contractor Name		
SUMMAR	Y OF THE SCOPE OF WORK	(
		7
The Contractor listed above has been l	hirad ta canduct the work	in the Summary of the Scone
The Contractor listed above has been l	or the facility listed above	
or work is	or the lacinty hotea above	••
Print Name		Title
Signature		Date



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UST Contractor Acknowledgement

	CONTRACTOR	
Contractor Name		
Contractor Mailing Address	City	Zip Code
	FACILITY	
	FACILITY	
Facility Name		
Facility Address	City	Zip Code
	OWNER	
	OWNER	
Owner Name		
SUMMAF	RY OF THE SCOPE OF WORK	
We have been contracted by the Ow		
the Scope of	Work for the facility listed abo	ove.
Print Name		Title
Signature	-	Date

Office of the Fire Marshal Hazardous Materials Section



UNDERGROUND STORAGE TANK CLOSURE REQUIREMENTS

Revised March 2022

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Introduction

California Health & Safety Code (CHSC) Section 25404 delegates authority for implementing and enforcing statewide Underground Storage Tank (UST) requirements to the local Certified Unified Program Agency (CUPA). In San Bernardino County, the Hazardous Materials Section of the San Bernardino County Fire Protection District's (SBCFPD) Office of the Fire Marshal (OFM), hereinafter referred to as the Section, is the CUPA for the entire county.

In San Bernardino County, no person shall abandon, close, or remove an underground storage tank, except with a permit from the CUPA.¹

The period between cessation of hazardous substance storage and the application for permanent tank closure shall not exceed ninety (90) calendar days.²

The UST shall continue to be monitored until all fuel is removed. The UST monitoring panel (e.g., Veeder Root) shall not be disconnected or power to the UST system may not be terminated prior to removal of fuel. The UST continues to be subject to all UST compliance requirements, monthly designated operator inspections, routine testing, and operating fees until the USTs are removed.

UPGRADE REQUIREMENTS

By December 31, 2025, facilities with single-walled USTs must permanently close the UST, and facilities with single-walled product piping must upgrade system to double-walled product piping.³

SAFETY

The contractor shall be responsible for ensuring that conditions at the site provide for workplace safety, protection of the environment, and the integrity of nearby structures. This includes:

- Identifying buried utility lines prior to digging
- Ensuring equipment is appropriately sized for excavation and sampling
- Excavation safety

TANK EXCAVATION AND CLEANING

Excavation of underground piping and the soil around the tank, and the removal of tank contents may go unwitnessed by this Section. A 48-hour notification must be sent to ustclerk@sbcfire.org prior to tank cleaning/rinsing (See below for notification requirements). Excavation and cleaning shall be done according to manufacture and/or industry standards. Other agencies, including the local fire authority, may require additional permits, notifications, or inspections.

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¹ SBCC 23.0722

² CCR 2670(e)

³CHSC 25292.05

TANK INERTING⁴

Flammable vapor must be purged from the UST to prevent an explosion or fire⁵. Lower Explosive Limit (LEL) readings shall be taken to confirm that the tank has been properly inerted.

SCHEDULING

UST closure inspection must be scheduled at least 10 days in advance with this CUPA by sending an e-mail to ustclerk@sbcfire.org. The e-mail shall contain the facility name, address, FA# (if available), CERS ID# (if available), and type of inspection in the subject line. The body of the e-mail will contain the requestor (e.g. contractor) name and contact information and requested date and times.

ADDITIONAL INSPECTIONS

Additional inspections will be billed on an hourly rate. Inspections extending beyond normal business hours will be charged as an after-hours inspection, with a 3-hour minimum charge.

PERMIT EXPIRATION

A new permit will be required if the project extends beyond the permit expiration date. Contact the UST Front Counter at (909) 386-8464 for additional questions.

ADDITIONAL AGENCY REQUIREMENTS

It is the responsibility of the UST owner or duly authorized representative to notify other governmental agencies that may have applicable permit requirements. This includes, but is not limited to, the following: local fire agency, local building department and Air Quality Management District. Failure to meet notification and permit requirements will cause the removal to be cancelled.

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⁴ CCR 67383.5

⁵ CCR 2672(b)(2), CCR 2672(c)(2)

Sampling

The UST owner/operator shall demonstrate to the satisfaction of this CUPA that an unauthorized release has not occurred. Demonstration shall be based on the analytical results of soil and/or water samples obtained following UST removal. Water sampling must occur if there is water in the excavation.⁶ Sampling shall be witnessed by an inspector from this CUPA.

It is the responsibility of the owner or operator to arrange for the samples to be collected and analyzed. A report documenting removal activities and analytical results shall be prepared. It is recommended that owners or operators who are not familiar with the process hire a knowledgeable contractor/consultant. This CUPA is responsible for regulatory oversight only and will not collect samples on the applicant's behalf.

Samples will be taken in the following places (as applicable):⁷

- One sample at each end of the tank
- One sample every 20 linear feet of piping trench
- One sample below each under dispenser containment (UDC)
- Ground water samples if groundwater is present
- From stockpiled soil that has been removed from the excavation
- From areas where visual staining or discoloration is observed
- From areas where a vapor-monitoring instrument indicates the highest reading.

To sample below the tank invert, collect samples at a minimum of 2 feet vertically into native material.

- For tank volumes less than 12,000 gallons—collect one sample at each end of the removed tank (two samples total)
- For tank volumes equal to or greater than 12,000 gallons—collect one sample at each end
 of the removed tank and one sample below the center of the removed tank (three samples
 total)

Soil stockpiled from the excavation shall be sampled and analyzed for the constituents of concern. If the stockpile will be disposed offsite, the disposal/recycling facility may have additional requirements. Typically, 3 discrete or appropriately composited samples will be required per each 50-cubic yards stockpiled.

Soil and/or water samples will be analyzed for constituents of concern based on prior tank contents according to the Leaking Underground Fuel Tank (LUFT) Manual. At minimum, the analytes in the table below must be tested. The inspector may require additional sampling, especially if areas of discoloration or odor are noted.

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⁶ CCR 2672(d)

⁷ Leaking Underground Fuel Tank (LUFT) Manual (2015): Refer to: https://www.waterboards.ca.gov/water_issues/programs/ust/luft_manual/manual_dec2015.pdf

MINIMUM CONSTITUENTS TO BE ANALYZED

<u>Gasoline</u>

Analytes	Analytical Method(s)
BTEX, Naphthalene, MTBE, TBA	EPA 8260 B/C
EDC, EDB (for pre-1992 release)	EPA 8260 B/C
Organic lead (GC-ECD) (Only if Pre-1992 release is detected)	EPA 6010/6020 or
	EPA 7000/7010
TPH (gasoline range: C ₅ -C ₁₂)	EPA 8015B GRO

Diesel #1 or #2

Analytes	Analytical Method(s)
BTEX, naphthalene, MTBE	EPA 8260 B/C
TPH (diesel range: C ₁₀ -C ₂₄)	EPA 8015B DRO (C ₁₂ -C ₂₂)

Waste (Used) Motor Oil

Analytes	Analytical Method(s)
BTEX, Naphthalene, MTBE, TBA, chlorinated VOCs	EPA 8260 B/C
16 priority pollutant PAHs	EPA 8270 SIM
Wear Metals (cadmium, chromium, nickel, lead, zinc)	EPA 6010/6020 or
	EPA 7000/7010
TPH (oil-range: C ₂₃ -C ₃₂)	EPA 8015B ORO (C ₂₃ -C ₃₂)

<u>Jet A, JP5, JP8, Fuel oil #1 or #2</u>

Analytes	Analytical Method(s)
BTEX, naphthalene, MTBE	EPA 8260 B/C
TPH (diesel range: C ₁₀ -C ₂₄)	EPA 8015B ORO (C ₂₃ -C ₃₂)

Heavy Fuel Oils (e.g. bunker fuel)

Analytes	Analytical Method(s)
BTEX, Naphthalene, MTBE	EPA 8260 B/C
16 priority pollutants PAHs	EPA 8270 SIM
TPH (oil-range: C ₂₃ -C ₃₂)	EPA 8015B ORO (C ₂₃ -C ₃₂)

BTEX	Benzene, toluene, ethylbenzene, & xylene	JP8	Jet Propellant 8 - Military Jet Fuel
DRO	Diesel-Range Organics by GC-FID	MTBE	Methyl tertiary butyl ether
EDB	1,2-dibromoethane	ORO	Oil-Range Organics by GC-FID
EDC	1,2-dichloroethane	PAH	Polycyclic aromatic hydrocarbon
GC-FID	Gas Chromatography / Flame Ionization Detector	TBA	t-Butyl alcohol
GRO	Gasoline-Range [or purgeable] organics by GC-FID	TPH	Total Petroleum Hydrocarbon
Jet A	Commercial Jet Fuel	VOC	Volatile organic compound
IP5	let Propellant 5 - Military let Fuel		

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Samples shall be prepared, stored, transported under chain-of-custody, and analyzed by appropriate Environmental Protection Agency (EPA)-approved methods. A California State-Certified Laboratory shall perform the sample analysis.

Detection of any unauthorized release shall be reported to this CUPA within 24 hours. Within five working days of detecting an unauthorized release, the owner or operator shall submit to the local agency through the California Environmental Reporting System (CERS) an Unauthorized Release Report.⁸

8 CCR 2652(b)&(c)

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Types of UST Closures

CLOSURE BY REMOVAL

Permanent closure by removal applies to USTs in which the storage of hazardous substances has ceased and there is no planned use of the tanks within the next twelve (12) consecutive months. An inspector from the Section must witness and document the removal and sampling. Sampling and analysis is required to determine if contamination exists and if further assessment of contamination is necessary.

CLOSURE IN PLACE

The Section may allow for a UST to be closed in place if there is a written letter from a certified professional engineer indicating that the removal of the UST would affect the structural integrity of adjacent structures.

If approved, all ancillary UST equipment and piping shall be removed. If any piping cannot be removed without damaging structures or other pipes being used in a common trench, then the pipe shall be emptied of contents and capped.⁹ The UST shall be filled with an inert, solid material.¹⁰ A soil and/or water sampling workplan shall be submitted by a geologist proposing the location and sampling intervals of proposed borings.¹¹

If at any time there is a major construction and the reason originally cited for not removing the UST is no longer valid, then the UST shall be removed at that time.

Found Tanks

Found tanks are long-abandoned USTs that are discovered, that were never previously regulated (i.e. operation of UST ceased prior to January 1, 1984).

If there is any liquid in the UST, the liquid shall be removed immediately, and a waste determination shall be conducted to determine proper disposal method. The manifest shall be submitted with the workplan and closure application.

A proposal to close or remove the UST(s) shall be submitted to the CUPA within 30 days of discovery. Failure to submit plans within the allotted timeframe will result in the UST being classified as an Abandoned UST and may result in enforcement action.

Found tanks that do not have any liquid are not entered in CERS¹².

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⁹ CCR 2672(c)(3)

¹⁰ CCR 2672(c)(4)

¹¹ CCR 2672(d)(2)

¹² Refer to https://www.waterboards.ca.gov/ust/cers/docs/cers_regulator_faq_abust.pdf; CHSC 25298, CCR 2670(f)

UST Closure Submittal Checklist

The Submittal Packet shall meet the minimum requirements, as listed below. Additional information may be requested. All information must be submitted electronically to ustplancheck@sbcfire.org.

APPLIC	CATION
	Facility Permits are Current: Existing facilities applying for a UST construction permit
	shall have a current Permit to Operate from this CUPA (i.e. all permit fees and any
	delinquent charges must be brought up to date prior to plan submittal).
	Construction Application: A complete and accurate Underground Tank Construction,
	Modification Application is submitted.
	Owner Acknowledgement Form: Completed by facility owner.
	Contractor Acknowledgement Form: Completed by the licensed contractor whose
	Contractor's State License Board (CSLB) certification is submitted with the packet (See
	Certifications section below).
	Payment : Check, Money Order, Cash, or Credit Card Payments are accepted. <i>Note</i> :
	Make checks payable to "SBCFD". We do not accept any checks with alterations.
CERTIF	ICATION CONTRACTOR OF THE PROPERTY OF THE PROP
А сору	of all appropriate, valid certifications for the proposed work shall be submitted for
everyo	ne conducting the work, including subcontractors.
	Contractor's State License Board (CSLB) with Hazardous Substance Removal
	Certification ¹³ (i.e. HAZ Endorsement)*
	Certificate of Liability Insurance – Workers Compensation and Employer's Liability*
SITE M	
The fol	llowing details must be present on the site map:
	The facility name, street address, and city are present.
	North arrow
	Building(s) onsite
	Adjacent streets
	All USTs—Specify the USTs that are being closed ¹⁴
	All Dispensers connected to USTs that are being closed
	All piping locations of UST system (including vent & vapor)

https://www2.cslb.ca.gov/About Us/Library/Licensing Classifications/HAZ -Hazardous Substance Removal Certification.aspx

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¹³ Business & Professions Code 7058.7(a) -

¹⁴ CCR 67383.3(a)(1)(A)

^{*} These requirements may be exempted if the owner is conducting the closure.

Additional Submittal Requirements: Closure in Place

If the proposed method of closure is "Closure in Place" for a tank, then the following information must be submitted <u>in addition</u> to the UST Closure Submittal Packet.

LETTER FROM PROFESSIONAL ENGINEER ¹⁵ □ A letter stamped by a Professional Engineer certifying that removal of the UST will cause undue damage to nearby utilities or building foundations, or it would cause unreasonable risk to life, health or property.
WORK PLAN ☐ Must show the locations and intervals for sampling per the most recent version of the Leaking Underground Fuel Tank (LUFT) Manual. ¹⁶
SITE MAP
The following information must be laid out on a site map:
 The site map must show the locations of the soil borings (slant boring or one boring on each end of the UST).¹⁷ Any piping that cannot be removed because it might damage structures or other pipes that are being used (e.g. pipes contained in a common trench) shall be clearly drawn along with the locations at which those pipes will be capped.¹⁸
Additional Submittal Requirements: Found Tanks
If the closure application is for a UST that was discovered and has never been regulated, then the following must be submitted <u>in addition</u> to the UST Closure Submittal Packet.
CUPA PERMIT APPLICATION
☐ (A complete and accurate CUPA Application form must be submitted.
HAZARDOUS WASTE DISPOSAL RECORDS Records must identify the hazardous waste removed from the tank.
SITE MAP
☐ (Must have the GPS coordinates (latitude/longitude) of the location of the tanks.

https://www.waterboards.ca.gov/water_issues/programs/ust/luft_manual_dec2015.pdf

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¹⁵ SBCC 23.07212

 $^{^{16}}$ Leaking Underground Fuel Tank (LUFT) Manual (2015): Refer to:

¹⁷ CCR 2672(d)(2)

¹⁸ CCR 2672(c)(3)

Prior to Closure Inspection

TANK CLEANING NOTIFICATION

_	
	Hazardous Waste Tank Closure Notification Form: A complete and accurate form must
	be submitted to ustclerk@sbcfire.org no less than 48 hours prior to tank
	cleaning/rinsing. The form can be found at www.sbcfire.org/ust .
	Certification : If the certifications for the person certifying the Hazardous Waste Tank
	Closure was not submitted during the initial plan submittal, the certification must be
	submitted with this form.
	Lab Results: If the tank contents are being certified through chemical analysis of the
	residue, then the lab results must be attached to this form.

UST Closure Inspection Checklist

These are the minimum requirements for the Tank Closure Inspection. Additional requirements may be set by the inspector onsite. Photographs may be taken as part of the inspection process.

☐ All residual liquids, solids, and sludges shall be removed and properly disposed prior to

TANK CLEANING

	inspection.
	The UST system shall be pressure washed/rinsed and rinsate shall be properly disposed.
	Rinsate manifest shall be available for review during the inspection.
	Flammable vapors shall be removed using a vacuum type pump system by a properly
	certified contractor.
TANK I	NERTING
	For tanks that previously held flammable materials
	The oxygen concentration shall be the same as that of the ambient air (\sim 20.8%).
	A properly calibrated CGI shall be onsite to document the LEL prior to removal or filling
	with inert material. CGI readings shall be obtained from the top, center, and bottom of
	the UST (must be done BEFORE inerting).
	The concentration of flammable vapor shall be 0% of the LEL of the material the tank held.
	The UST must be inerted with a minimum of 22.2 lbs. of carbon dioxide, dry ice per 1,000
	gallons of UST capacity.
	Cutting On-site: If the tank held a flammable or combustible material and the tank, piping,
	and/or appurtenances are cut onsite, non-sparking, cold-cutting tools or process shall be
	used.

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TANK I	REMOVAL AND DISPOSITION											
	All piping, dispensers, vent lines and Enhanced Vapor Recovery (EVR) Phase II equipment											
	shall be removed prior to inspection.											
	For USTs larger than 2,000 gallons, removal of the UST from the excavation and loading											
	onto a truck for transport shall be accomplished using a crane. Other equivalent											
	equipment will only be allowed with pre-approval from this CUPA.											
	The UST shall be appropriately transported and disposed. Shipping papers or work orders											
	shall be available documenting the intended disposition of the USTs.											
SAMPL	<mark>.ING</mark>											
	At least (1) sample must have a GPS coordinate noted.											
	Samples shall be collected from at least 2 feet below native material (not from fill											
	material).											
	At least (1) sample taken from each end of the tank.											
	A sample shall be taken every 20 linear feet of piping and/or at each joint, bend or											
	connection.											
	One sample taken beneath each under dispenser containment.											
	Groundwater samples taken if groundwater is present.											
	to (c) the transfer approximation product the contract of the											
_	stockpiled.											
•	Excavated soil shall not be used as backfill unless it can be demonstrated that soil is not											
	contaminated (i.e., Total Petroleum Hydrocarbons (TPH) must not exceed 100 mg/kg with											
	no volatile organic compounds or MTBE detected).											
•	Samples shall be prepared, stored, transported under chain-of-custody, and analyzed by											
	(appropriate Environmental Protection Agency (EPA) methods. A California State-Certified											
	Laboratory shall perform the sample analysis.											
•	Additional samples may be required depending on site conditions (inspector discretion											
	(will apply). If the stockpile is disposed offsite, documentation of location shall be											
	(provided.)											
* -												
	CLOSURE IN PLACE											
This wi	ill be verified if a tank is closed in place:											
_	Piping associated with the UST shall be removed and properly disposed of. Any piping											
that has been approved to remain shall be emptied of all contents and capped.												
	Soil borings shall be taken as specified in the approved workplan.											
	The UST shall be filled with an approved inert material and nonhazardous substance.											

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Tank Closure in California Environmental Reporting System (CERS)

The following changes shall be made in CERS within 30 days of the Closure Inspection. If CERS is not updated in a timely manner, then a proxy CERS submission will be conducted by the CUPA to properly report the tank closure. Found tanks are not required to be reported in CERS if there is no liquid in the tanks.

UST ELEMENT

UST Facility Operating Permit Application
☐ Type of Action : If all USTs are removed or closed in place, then select "Permanent Facility Closure." Otherwise, select "Confirm/Update Information."
<u>UST Tank Information</u>
 Must be Updated for EACH Tank Closed □ Type of Action (UST Tank): Select "UST Removal" or "UST Permanent Closure on Site." □ Date UST Installed: This field cannot be blank. If the date of install is unknown, enter 01/01/1900. □ Date UST Permanently Closed: Enter UST removal or closure on site date.
Miscellaneous State-Required Documents
☐ UST Site-Unauthorized Release / Contamination Report: This form must be uploaded into CERS if contamination is detected.
TANK ELEMENT
Hazardous Waste Tank Closure Certification: Complete form must be submitted in CERS

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UST Closure Report Checklist

Detection of any unauthorized release shall be reported to this CUPA within 24 hours. This CUPA will evaluate all data and determine if any further corrective action is required.

Submit a UST Closure Report within 60 days of the UST removal/sampling date to ustcompliance@sbcfire.org. Failure to submit all required documentation within the allotted time frame may result in enforcement action.

The job will not be considered complete until all closure documentation is received.

<mark>Plan</mark>
contain the following:
The plan shall be to scale.
North orientation
The locations of the former UST systems including the tanks, dispensers, and piping
relative to permanent landmarks/buildings.
The plan shall have the location, depth and sample ID for each sample taken. At least one
sample shall have a GPS coordinate attached.
MENTATION
Copy of the rinsate manifest shall be submitted.
Copy of the UST disposal/destruction certificate shall be submitted.
Copy of the laboratory analysis with chain of custody.
Copy of the laboratory analysis with chain of custody.
Copy of the laboratory analysis with chain of custody. URE REPORT

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References

- California Code of Regulations (CCR)
 - Title 23, Division 3, Chapter 16, Article 7, (Underground Storage Tank Closure Requirements) Sections 2670-2672 (General Applicability, Temporary Closure Requirements, Permanent Closure Requirements)
 - o Title 22, Division 4.5, Chapter 32 (Management of Tanks), Section 67383.1-67383.5
- California Health and Safety Code Section 25298 (Abandonment, Closing, or Temporary Ceasing of Operation of Underground Storage Tank)
- San Bernardino County Code Title 2, Division 3, Article 2 (Underground Storage Tanks CUPA Program Element) Sections 23.07210 – 23.07214
- PEI/RP1700-18 Recommended Practices for the Closure of Underground Storage Tanks and Shop-Fabricated Aboveground Storage Tank Systems
- Leaking Underground Fuel Tank Guidance Manual. California State Water Resources Control Board (September 2012). Refer to:

https://www.waterboards.ca.gov/water issues/programs/ust/luft manual/manual dec2015.pdf

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San Bernardino County Fire Protection District • Hazardous Materials Section 598 S. Tippecanoe Ave., San Bernardino, CA 92415-0153 • (909) 386-8401 FAX (909) 386-8460

HAZARDOUS WASTE TANK CLOSURE NOTIFICATION FORM

This form must be submitted prior to initiating cleaning, cutting, dismantling, or excavation of a tank system that previously held hazardous materials or hazardous waste (California Code of Regulations § 67383.3).

I. FACILITY IDENTIFICATION											
FACILITY ID # CERS ID #				FACILITY NAME							
FACILITY SITE ADDRESS				FACILITY CIT	Y		FACILITY ZIP CODE				
TANK OWI	TANK OWNER NAME										
TANK OWI	NER ADDRESS			CITY		STATE	ZIP CODE				
DATE(S) THE TANK SYSTEM WILL BE CLEANED AND/OR EXCAVATED, OR CLOSED IN PLACE											
	II. TANK	DESCRIPTI	ON (Atta	ach additional	copie	s of this page for	more tanks)				
TYPE	TANK ID#	SIZE (GAL)		ONTENT		LOCATION	METHOD OF CLOSURE				
☐ ATS							☐ Removal				
□ UST							☐ Closure in Place				
☐ ATS							☐ Removal				
□ UST							☐ Closure in Place				
☐ ATS							☐ Removal				
□ UST							☐ Closure in Place				
III. TANK CLOSURE CERTIFIER											
NAME OF I	PERSON AND/OR B	SUSINESS OF C	ERTIFIER	(Must Match	I CREI	DENTIALS)					
				•		,					
CREDENTI	AL OF CERTIFIER (ATTACH COPY	CREDEN	TIALS WITH TH	IS FOR	RM)					
CREDENTIAL OF CERTIFIER (ATTACH COPY CREDENTIALS WITH THIS FORM) ☐ Contractors State License Board (CSLB) licensed ☐ California Registered Environmental Health											
	contractor (with Hazardous Substance Removal Specialist (REHS)										
Certification) □ Professional Engineer (PE) registered in Californ											
☐ Californ	nia Certified Indus	strial Hygienis	t (CIH)		☐ Class II Registered Environmental Assessor						
☐ Californ	nia Certified Safet	v Professiona	al (CSP)		☐ Class if Registered Environmental Assessor ☐ California Certified Marine Chemist (CMC)						
		VNK DESTIN	DESTINATION								
DESCRIBE	THE INTENDED DIS	SPOSITION ANI									
DESCRIBE THE INTENDED DISPOSITION AND DESTINATION OF THE TANK SYSTEM											
							RDOUS WASTE				
Select on	e of the following	options to ide	ntity the i	hazardous ma	terials	s or hazardous wa	aste last held in the tank:				
	•	•		•	-		waste last stored or				
	ted in the tank(s)										
□ OPTION B : A chemical analysis of the residue in the tank(s) has/have been completed and the lab results are											
attached with this form.											
OWNER /	OWNER / OPERATOR SIGNATURE OWNER / OPERATOR TITLE										
OWNER /	OPERATOR NA	ME (PRINT)		D	ATE						
İ											

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San Bernardino County Fire Protection District • Hazardous Materials Section 598 S. Tippecanoe Ave., San Bernardino, CA 92415-0153 • (909) 386-8401 FAX (909) 386-8460

Instructions for the

HAZARDOUS WASTE TANK CLOSURE NOTIFICATION FORM

WHEN IS THIS FORM NEEDED?

Prior to initiating cleaning, cutting, dismantling, or excavation of an aboveground or underground tank that previously held a hazardous material or hazardous waste, the owner or operator of the tank system shall submit a written notification to the CUPA with all information outlined in this form (California Code of Regulations Title 22 Division 4.5 Chapter 32 §67383.3).

HOW IS THIS FORM SUBMITTED?

Aboveground Tank System (ATS)

For aboveground tank systems, this form can be uploaded into the California Environmental Reporting System (CERS) under the Tank element or it can be mailed to this office. Closure activities can occur once all appropriate agencies have been notified.

<u>Underground Storage Tank (UST)</u>

For underground storage tanks, this form must be submitted with the UST Closure Submittal through the plan check process. Removal activity, including tank cleaning, cannot begin until plan approval has been received for the site. Contact the UST Front Counter Technician for additional questions at (909) 386-8464.

HOW IS THIS FORM COMPLETED?

I. FACILITY IDENTIFICATION

Facility ID #: Enter the Facility ID Number. This number is assigned by the CUPA and begins with the letters FA. If the Facility ID Number is unknown, leave this section blank.

CERS ID #: Enter the 10-digit identification number assigned by CERS, if applicable. If the CERS ID # is unknown, leave this section blank.

Facility Name: Name of the business where the tank is located. If there is a CUPA permit associated with this site, then the business name must match the facility name of the permit.

Facility Site Address, City, Zip Code: Enter the physical address (no PO Boxes) for the site.

Tank Owner Name: Enter the name of the tank owner. For USTs, this name must match the UST Facility Operating Permit Application in CERS.

Tank Owner Address, City, Zip Code: Enter the mailing address, city, state, and zip code of the tank owner. This should match the address on CERS.

Date(s) the Tank System Will be Cleaned and/or Excavated or Closed in Place: Enter all the expected date range(s) at which time tank cleaning, tank excavating, or tank closure in place may occur.

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II. TANK DESCRIPTION

If more than 3 tanks are being closed, submit additional forms (as needed). Enter the Page Number on the bottom right hand corner to identify the number of pages.

Tank ID #: Enter the identification number of the tank. If the tank is an UST, then the state-assigned CERS Tank ID # must be entered. If it is an ATS, the Tank ID # may be assigned by the owner.

Size: Enter the total capacity of each tank in gallons.

Content: Enter the name of the hazardous material or hazardous waste the tank most recently held (e.g. motor oil, gasoline, diesel, used oil etc.).

Location: Enter the location of the tank system in reference to the facility.

Comment: Provide any additional information about the tank system (e.g. this is a part of a compartmentalized tank with Tank #2)

III. TANK CLOSURE CERTIFIER

Name of Person and/or Business of Certifier: Enter the name of the person or the name of the business that will be certifying the closure. The name here must match the credentials attached.

Credential of Certifier: Check the type of certification under which the closure will take place. A copy of the certification must be submitted with this form. In San Bernardino County, the CUPA does not certify closure of tanks.

IV. TANK DESTINATION

Describe the intended disposition and destination of the tank system: Give the name and address of the location where the tank (or it's pieces) will be taken.

V. IDENTIFICATION OF THE HAZARDOUS MATERIALS OR HAZARDOUS WASTE

The owner or operator must identify the hazardous material or hazardous waste last held in the tank(s). This can be done using the following options:

- **OPTION A**: If the contents of the tank are known, then check the box "I certify to the best of my knowledge that the identity of the material or waste last stored or accumulated in the tank(s) are as listed in Section II (Tank Description) of this section." Supporting documentation does not need to be submitted if this is selected.
- **OPTION B**: If the contents of the tank are unknown, then a chemical analysis must be done to determine the content of the tank. Select the box "A chemical analysis of the residue in the tank(s) has/have been completed and the lab results are attached with this form." Submit the lab results with this form.

Owner/Operator Signature: Signature of the person certifying the content of the tank.

Owner/Operator Name: Name of the person certifying the content of the tank. **Owner/Operator Title**: Title of the person certifying the content of the tank.

Date: Date the tank contents are being certified.

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HAZARDOUS WASTE TANK CLOSURE CERTIFICATION															
			CILITY IDENTIFICATION												
FACILIT	Y ID#	CERS II	D #		FACI	LITY N	AME								
FACILIT	Y SITE ADD	RESS			FACI	LITY C	ITY			FA	CILITY	ZIP C	ODE		
TANK O	WNER NAM	1E													
.,		· -													
TANK O	WNER ADD	RESS		CITY			STAT	Έ		ZIP	ZIP CODE				
	ΙΙ ΤΔΝΚ	CLOSURE	INFOR	ΜΔΤΙΟΙ	N (Atta	ach add	itional c	onies o	f this n	age fo	r more	tanks			
	III I AINIX	OLOGORE			•		RIOR A	•	•			,			
	TANK ID#		Conce	ntratio			ole Vap						raen (º	<u>//</u>	
(If UST, o	enter CERS	Tank ID #)	To			nter		Bottom		Тор		tration of Oxyger Center B		ottom	
DIRECT	IONALITY (U	IST Only)		<u> </u>			Bottom			P	Conten				
□ ATS		JOT OTTY)													
□UST															
□ ATS															
□ UST															
□ ATS															
□ UST												<u> </u>			
III. CERTIFICATIONS On examination of the tank, I certify that the tank is visually free from product, sludge, scale (thin, flaky															
	residual of tank contents), rinsate and debris. I further certify that the information provided herein is true and accurate to the best of my knowledge.														
CERTIFIER SIGNATURE					STATUS OR AFFILIATION OF CERTIFYING PERSON										
					Check the appropriate box below to indicate the status of the										
CERTIFI	IER NAME /	BUSINES	S (Print)		certifier: Contractors State License Board (CSLB) licensed contractor										
CERTIFI	IER TITLE				(with Hazardous Substance Removal Certification)										
OLIVIIII	ILIX IIILL				☐ California Certified Industrial Hygienist (CIH)										
CERTIFI	IER ADDRE	SS / CITY			☐ California Certified Safety Professional (CSP)										
					☐ California Certified Marine Chemist (CMC)										
CERTIFIER PHONE					☐ California Registered Environmental Health Specialist										
DATE CERTIFIED TIME CERTIFIED					(REHS)										
					□ Professional Engineer (PE) registered in California□ Class II Registered Environmental Assessor										
This tank	k previously	⊥ held flamm	able or c	combust									all be r	e-	
	with a comb							□ Yes			Ю				
CERTIFIER'S TANK MANAGEMENT INSTRUCTIO							SCRAF	DEAL	ER, DI	SPOS	AL FA	CILIT	Y, ETC	::	

A copy of this certificate shall accompany the tank to the recycling / disposal facility. Copies shall be submitted to the CUPA, the owner / operator of the tank system, the removal contractor, and the recycling / disposal facility.

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Instructions for the

HAZARDOUS WASTE TANK CLOSURE CERTIFICATION FORM

WHEN IS THIS FORM NEEDED?

A hazardous waste tank closure certification must be completed whenever an underground storage tank (UST) or aboveground tank system (ATS) that previously held hazardous materials or hazardous waste is being closed by removal or closed in place and is subject to the tank closure requirements of the California Code of Regulations Title 22 Division 4.5 Chapter 32 §67383.1-67383.5.

HOW IS THIS FORM SUBMITTED?

The completed hazardous waste tank closure certification MUST be submitted in California Environmental Reporting System (CERS). Under Business Activities, answer "Yes" to the question "Does your facility need to report the closure/removal of a tank that was classified as hazardous waste and cleaned on-site?" The "Tank" Element will appear. Upload this form in that element.

HOW IS THIS FORM COMPLETED?

I. FACILITY IDENTIFICATION

Facility ID #: Enter the Facility ID Number, if known. This number is assigned by the CUPA and begins with the letters FA. It can be found on the facility's CUPA permit.

CERS ID #: Enter the 10-digit identification number assigned by CERS, if applicable. If the CERS ID # is unknown, leave this section blank.

Facility Name: Name of the business where the tank is held. If there is a CUPA permit associated with this site, then the business name must match the facility name of the permit.

Facility Site Address, City, Zip Code: Enter the physical address (no PO Boxes) for the site.

Tank Owner Name: Enter the name of the tank owner. For USTs, this name must match the UST Facility Operating Permit Application in CERS.

Tank Owner Address, City, Zip Code: Enter the address, city, state, and zip code of the tank owner. This should match the address on CERS.

II. TANK CLOSURE INFORMATION: Tank Interior Atmosphere Readings

If more than 3 tanks are being closed, then submit additional forms (as needed). Enter the Page Number on the bottom right hand corner to identify the number of pages.

Trained personnel must take these readings with a calibrated monitoring device (such as a combustible gas indicator (CGI)).

Tank ID #: Enter the identification number of the tank. If the tank is an UST, then the state-assigned CERS Tank ID # must be entered. If it is an ATS, the Tank ID # may be assigned by the owner.

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Directionality: For USTs, CGI readings shall be taken at the top, center, and bottom of each interior end. Enter the directionality of the end at which the reading was taken. S = South, N = North, E = East, W = West, SW = Southwest, SE = Southeast, NE = Northeast, NW = Northwest. For an ATS, only enter ONE reading for the top, center, and bottom. Strike through all other sections.

Concentration of Flammable Vapor: Indicate the Lower Explosive Level (LEL) in percentages, taken at the top, center and bottom of the interior. For USTs, LEL readings shall be taken at the top, center, and bottom of EACH interior end. The LEL readings shall be 0% for the material or waste the tank previously held.

Concentration of Oxygen: Indicate the Oxygen levels, in percentages, taken at the top, center and bottom interior. For USTs, oxygen readings shall be taken at the top, center, and bottom of EACH interior end. The readings shall be the same as that of the ambient air (~20.8%).

III. CERTIFICATIONS

Status or Affiliation of Certifying Person: Check the box that indicates the authority by which the person is certifying this (NOTE: Within San Bernardino County the CUPA does not certify tank closures).

Certifier Signature: The Certifier shall read the statement above the certifier's signature field and sign attesting to the information on this certification.

Certifier Name / Business: Print the name of the person certifying this information and the Business (if applicable) the person is affiliated with (e.g. the Contractor).

Certifier Title: Enter the title of the person certifying this information.

Certifier Address / City: Enter the address and city of the person certifying this information.

Certifier Phone: Enter the phone number of the person certifying this information.

Date Certified / Time Certified: Enter the date and time that this information is certified.

This tank previously held flammable or combustible materials: Check the box that indicates whether the UST/ATS(s) contained flammable or combustible materials.

Certifier's Tank Management Instructions for Scrap Dealer, Disposal Facility, Etc.: Enter your instructions for the recycling facility, scrap dealer, disposal facility, etc. that is receiving the tank.

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