



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 No.	E-mail
Site Address		City	Zip Code

CONTRACTOR

Company Name	Contact Person	Phone No.	E-Mail
Mailing Address		City	Zip Code

ENGINEER/ARCHITECT

Company Name	Contact Person	Phone No.	E-Mail
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NATURE OF WORK

All fees listed below are for FY 2023-2024

Modification/Repair WITHOUT Excavation (Minor) – 1 Inspection Only (\$526.00)

- 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 Inspection (\$1974.00)

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

Installations – Up to 4 Inspections (\$3922.00)

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

Removal (1st tank = \$605.00 + \$157.00 per each additional tank)

- Removal Only ⇨ # of Tanks Removed: _____
 Removal + Install (Removal fee + \$3922.00) ⇨ # of Tanks Removed: _____ # of Tanks Installed: _____

Special Inspections / Plan Submittals

- Resubmittal (\$368.00) Consultation Fee (\$157.00/hr) Special Inspection (\$157.00/hr) Temporary Closure (\$710.00)
 After-Hours Inspection (\$604.00 per 1st 3hrs + \$201.00 per each additional hr) Failure to Keep Appointment (\$157.00/appt) Cold Start (\$345.00)
 Exploratory Permit w/excavation ⇨ Initial Permit (\$1974.00) Exploratory Permit w/o excavation ⇨ Initial Permit (\$526.00)
 Addendum (\$368.00) Addendum (\$368.00)
 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 _____	Log #: _____ <input type="checkbox"/> Rolled Plans
<input type="checkbox"/> New Facility	Permit Fee Paid: \$ _____ Receipt Number: _____
<input type="checkbox"/> Permitted Facility ⇨ Expiration Date: _____	Check Number: _____ Date Paid: _____
Permits Current? <input type="checkbox"/> Yes <input type="checkbox"/> No	Failure to apply for a permit? <input type="checkbox"/> No <input type="checkbox"/> Yes
# Regular UST(s): _____	Work without approved permit? <input type="checkbox"/> No <input type="checkbox"/> Yes
# Complex (VPH) UST(s): _____	Received By: _____
Service Request #: SR _____	