

## **Howland Township Fire Department**

169 Niles Cortland Road N.E. Warren, Ohio 44484

Phone 330-856-5022 FAX 330-609-9977

## **Application for Underground / Aboveground Storage Tank Permit**

I. Ownership of Tanks						II. Location of	Tanks			
Owner/Operator Name:						Facility Name:				
Address:						Address:				
City:	State:		Zip:			City: S	state:		Zip:	T
Contact Name:	State.		Ζip.			City.	itate.		Zip.	
Contact Phone:										
contact mone.										
III. Contractor						IV. Local Fire Department				
Contractor's Name:				Howland Township Fire De					t	
Contact Name:					169 Niles-Cortland Rd. NE					
Contact Phone:					Warren, OH 44484					
Address:						330-856-5022				
I .				Fax: 330-609-9977						
City:	State:		Zip:							
V. Permit Typ	e									
Type of Work Being Performed:				of Tanks:		Cost:			Total:	
AST/UST System Installation					Х	\$150.00 per System		=		
AST/UST System Change in Service					Х	\$150.00 per System		=		
AST/UST System Temporary Closure					Х	\$150.00 per System		=		
Leak Detection Upgrade				n/a	Х	\$150.00 per Location		=		
Piping Abandonment Only				n/a	Х	\$150.00 per Location		=		
Piping Installation Only				n/a	X	\$150.00 per Location		=		
Piping Removal Only				n/a	X	\$150.00 per Location		=		
Piping Repair Only				n/a	X	\$150.00 per Location		=		
Piping Replacement Only				n/a	X	\$150.00 per Location		=		
Piping Upgrade Only				n/a	X	\$150.00 per Location		=		
Tank Abandonment in Place					X	\$150.00 per Tank		=		
Tank Removal					X	\$150.00 per Tank	00 per Tank =			
Tank Repair					X	\$150.00 per Tank	per Tank =			
Tank Replacement					X	\$150.00 per Tank	.00 per Tank =			
Tank Upgrade					Х	\$150.00 per Tank		=		
							TOTAL FEE:			
Signature of Applicant:							Date:			
Make checks payable to: Howland Township Fire Department										