



TOWN of
WAKE FOREST

Permit Application for the Installation, Removal or Abandonment of Underground or Above Ground Storage Tanks

Planning & Inspections Department | 301 South Brooks Street
Wake Forest, NC 27587 | Phone: (919) 435-9530 | Fax: (919) 435-9538

Date Submitted: ____/____/____

Fee: \$100.00 (per tank)

(Check all applicable boxes)

| | | | |
|---|--|--|--|
| <input type="checkbox"/> Installation | <input type="checkbox"/> Removal | <input type="checkbox"/> Testing | <input type="checkbox"/> Change-in-Service |
| <input type="checkbox"/> Underground Storage Tank | <input type="checkbox"/> Above Ground Tank | <input type="checkbox"/> Piping System | |

Business Name: _____ Contact: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Location of Tank(s): _____

TANK ID#

TANK CAPACITY

TANK CONTENTS

Contractor: _____ Contractor's N.C. ID#: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Contact Individual: _____ Title: _____

Contact Phone No. (Office): _____ Mobile No.: _____

Scheduled Work Date(s): _____

Complete and return this application and provide all required information at least fourteen (14) days prior to commencing any proposed work to include: installation, excavation, removal, testing, closure or change-in-service of all above and underground storage tanks. The following items are **required** to be submitted with this application:

1. Copy of North Carolina Department of Environment, Health and Natural Resources GW/NST-3 Notice of Closure Intent.
2. Number of tanks to be removed including the capacity and contents of each tank.
3. UL# of each tank (if applicable).
4. Information describing the implied disposition of the tanks post-removal.
5. A site plan identifying any significant elements of the tank removal/abandonment site.

Failure to provide any of the above listed items will result in delay or refusal to issue this permit.

Applicant Signature: _____ Date: _____

Approved by: _____ Date: _____