



Mitchell Dept. of Public Safety  
 Fire Prevention Division  
 Underground Tank Permit Application

Permit No. \_\_\_\_\_ App. \_\_\_\_\_ Date: \_\_\_\_\_  
 Receipt No. \_\_\_\_\_ Issue \_\_\_\_\_ Date: \_\_\_\_\_  
 Fee: \$ \_\_\_\_\_ Approved By: \_\_\_\_\_

**Installation Location**  
 Owner/Business: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Mitchell, SD \_\_\_\_\_  
 Phone No.: \_\_\_\_\_

**Installer**  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone No.: \_\_\_\_\_

PLEASE PRINT NEATLY

**Building / Facility Type**

Manufacturing  Warehouse  
 Commercial  Private Use  
 Retail  Institutional  
 Generator Others (specify) \_\_\_\_\_

**Description of Work**  
 (Detailed explanation of area and extent of work to be performed)  
 Design and installation shall be in accordance with current edition of NFPA.

Type of Backfill Material: \_\_\_\_\_  
 Depth of Cover (feet): \_\_\_\_\_

**General**  
 New  Replacement  
 Are other existing tanks on site? Yes  No   
 If yes, how many and type: \_\_\_\_\_

Tanks		#1	#2	#3	#4	
UL Listing and No. (i.e., 2080, 2085, etc.)						
Capacity (Gallons)						
Product Being Stored						
Tank Material and Dimensions						
Cathodic Protection Type						
Type and Model No. of Overfill Protection						
Normal Vent Model No., Size, and Discharge Location						
Type and Model of Interstitial Monitoring						
<b>Dispensers</b> No. of Dispensers: _____ Make and Model: _____	<b>PIPE</b>	Material				
		Cathodic Protection				
		Coating				
		Total LF of Pipe				

### Notification

As required by Chapter 74:56:01 of the Administrative Rules of South Dakota, the tank owner shall provide written notification to the SD Ground Water Quality Program, 523 E. Capitol, Pierre, SD 57501 ([www.state.sd.us/denr](http://www.state.sd.us/denr)).

A minimum of two sets of drawings and one submittal document shall be submitted with each permit application for review. Drawings shall include scaled site plan, dimensioned plans showing tanks' side and top views, and other pertinent details required for a comprehensive review and approval. Submittal documents shall include tank, equipment, monitoring, communication, and dispensing specifications, UL listing, model No., and manufacturer's name. The applicant will receive one stamped copy of the approved plans. Additional submitted sets will not be stamped. ***NO WORK SHALL COMMENCE WITHOUT AN APPROVED SET OF PLANS AND A VALID PERMIT ISSUED BY FIRE PREVENTION DIVISION.***

### Applicant

I, the undersigned, do hereby affirm that the statements contained on this form are true and correct. I further agree to comply with the provisions of applicable ordinances of the City of Mitchell and the approved plans and specifications submitted with this application.

In addition, it is understood that the installation of systems shall be made only by persons properly trained and qualified to install the specific system being provided. The installer certifies to this authority that the installation is in complete agreement with the terms of the listing and manufacturer's instructions and/or approved design plan.

Signature: \_\_\_\_\_

Name (print): \_\_\_\_\_

## Fee Calculation Schedule

### Underground Storage Tank Installation

Description	Number of Each	Unit Fee	Subtotal
1. No. of Storage Tanks		\$58.00	\$
2. Total footage of Liquid Containing Pipes		\$ 1.00	\$
<b>3. Total lines 1 and 2</b>			<b>\$</b>
4. Expedited Plan Check Review Fees (50% of line 3)			\$
<b>5. Grand Total</b>			<b>\$</b>

**Mitchell Department of Public Safety  
Fire Prevention Division  
201 West 1<sup>st</sup> Avenue  
Mitchell, SD 57301**

**605-995-8400**