

OFFICE OF THE ILLINOIS STATE FIRE MARSHAL

Division of Technical Services

1035 Stevenson Drive Springfield, Illinois 62703-4259 (217)524-7605

Extended

FOR OFFICE USE ONLY

Facility # 1-043222 Permit # 00596-2006REM Request Rec'd 04/27/2006 Amended Date Approval Date 4/28/2006 JC Permit Expires 4/28/2007

Permit for REMOVAL of Underground Storage Tank(s) and Piping for Petroleum and Hazardous Substances.

Permission to remove underground storage tank(s) or piping is hereby granted. Such removal shall not commence until the contractor the permit was issued to or an employee of that contractor (this does not include a subcontractor) shall establish a date certain to perform the UST activity by contacting the Office of the State Fire Marshal, Division of Petroleum and Chemical Safety, by telephone at the Springfield office between 8:30 a.m. and 12:00 p.m., at which time a mutually agreed upon date and time for the UST activity shall be scheduled. **THIS PERMIT IS VALID FOR SIX MONTHS FROM THE**APPROVAL DATE

APPROVAL DATE.		
(1) OWNER OF TANKS - Corporation, partnership, or other business entity:	(2) <u>FACILITY</u> - name and address where tanks are located:	
Unknown -orphan tank	IDOT R.O.W.	
unknown, voluntary 3rd party removal	Station 825 & 25 to Station 825 & 40,W. Lincoln Highw	way
Unknown, IL 00000	Hinckley, De Kalb Co., IL	
Contact:	Contact:	
(3) <u>REMOVAL OF TANKS:</u>		
(a) Number and size of tanks being removed: (TK # 1) - U.	NKNOWN gallons	
(b) Product stored in each tank: (TK # 1) - Unknown		
(c) Reason of tanks being removed: Road improvement		
(d) If tank(s) is leaking, indicate IEMA incident number:		
(e) Date each tank was last used: (TK # 1)		
 (4) The owner must notify this Office when completion of tank upgrature form and the licensed contractor must submit the required job submit prevention to the OSFM prior to the work being performed. Both SPECIAL CONTINGENCIES: Extension request received 10/26/26/26/26/26/26/26/26/26/26/26/26/26/	chedule for underground piping upgrade, leak detection, spill and the forms can be obtained at www.state.il.us/osfm or by calling (2)	nd overfill
(6) PERSON, FIRM OR COMPANY PERFORMING WORK:		
	Contact Person:	_
5290 Nimtz Rd	Phone:	
	Contractor Registration #	Exp.
Sincerely,		

cc: Storage Tank Safety Specialist Fire Department Office Coordinator Division File
(Rev. - 1/98)