



OFFICE OF THE ILLINOIS STATE FIRE MARSHAL
Division of Technical Services
 1035 Stevenson Drive
 Springfield, Illinois 62703-4259
 (217)524-7605
Amended

FOR OFFICE USE ONLY
 Facility # 4-012375
 Permit # 00026-2007INS
 Request Rec'd 01/03/2007
 Amended Date 02/01/2007
 Approval Date 1/5/2007 JC
 Permit Expires 7/5/2007

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

Permission to install underground storage tank(s) or piping is hereby granted. Such installation must be in complete accordance with acceptable materials as specified in the Federal Register, Part II Environmental Protection Agency, 40 CFR Parts 280 and 281, and also with all sections of 41 Illinois Administrative Code, Part 170. The contractor the permit was issued to or an employee of that contractor (this does not include a subcontractor) shall submit a required job schedule for installation of underground storage tank(s) to the Office of the State Fire Marshal, Division of Petroleum and Chemical Safety. **THIS PERMIT IS VALID FOR SIX MONTHS FROM THE APPROVAL DATE.**

<p>(1) OWNER OF TANKS - Corporation, partnership, or other business entity: Colonial Pantry, LTD 716 South Randolph Street, P.O. Box 1004 Champaign, IL 61820 Contact: Patrick Miller (217) 352-6789</p>	<p>(2) FACILITY - name and address where tanks are located: Colonial Pantry #13 616 S. Bowman Ave. Danville, Vermilion Co., IL Contact: Dave Brazelton (217) 477-0193</p>
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(3) INSTALLATION OF TANKS:

- (a) **Number and size of tanks being installed:** (TK # 5) - 12,000 gallons, (TK # 6, 7) - 4,000 gallons
- (b) **Type of tanks:** (TK # 5, 6, 7) - (Installing) Containment Solutions single wall fiberglass (TK # 6, 7) - Tanks 6 & 7 comprise a compartment tank.
- (c) **Type of piping:** (TK # 5, 6, 7) - (Installing) A.O. Smith double wall fiberglass, (TK # 5, 6, 7) - Existing double wall fiberglass (TK # 5, 6, 7) - Partial piping will be installed to hook into the existing partial piping from previous tanks 1,2,3. Partial vent piping will also be installed and hooked into existing partial vent piping.
- (d) **Product to be stored in each tank:** (TK # 5, 7) - Gasoline, (TK # 6) - Diesel Fuel
- (e) **Type of leak detection being used:**
Tank: (TK # 5, 6, 7) - (Installing) Red Jacket ST1401L automatic tank gauge (TK # 5, 6, 7) - Contractor is re-using the existing ATG console, submersible pumps, and tank probes from tanks 1,2,3.
Piping: (TK # 5, 6, 7) - (Installing) Red Jacket ST1401L electronic line leak detector
- (f) **Corrosion Protection being used:**
Tank: _____
Piping: (TK # 5, 6, 7) - Existing fiberglass, (TK # 5, 6, 7) - (Installing) Fiberglass
- (g) **Spill containment devices:** _____
- (h) **Overfill prevention devices:** _____

(4) The owner must notify this Office when completion of tank installation has occurred, on the Notification for Underground Storage Tank Form and the licensed contractor must submit the required job schedule for installation to the OSFM prior to the work being performed. Both forms can be obtained at www.state.il.us/osfm or by calling (217)785-1020.

(5) GENERAL REQUIREMENTS: There shall be a minimum of two manufactured slotted or perforated observation wells of at least 4 inches in diameter, installed in each new tank field of tanks larger than 1000 gallons and one well for tanks less than 1000 gallons. A water tight containment shall be installed under all dispensers and at submersible pumps. A hydrostatic test must be performed on all containments. All steel piping for vents, risers, and fills in contact with the ground, backfill, or water shall be dielectrically wrapped or coated. A positive shut off valve shall be installed on pressurized product lines, at the submersibles, or installed at the tank for all suction piping systems. Vent piping is required to be tested from tank to grade level. All steel flex connectors in contact with ground, backfill or water shall have corrosion protection.

(6) SPECIAL CONTINGENCIES: _____

<p>(7) PERSON, FIRM OR COMPANY PERFORMING WORK: _____ _____ _____</p>	<p>Contact Person: _____ Phone: _____ Contractor Registration # _____ Exp. _____</p>
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Sincerely,

