



IDAHO PETROLEUM STORAGE TANK FUND
1215 WEST STATE STREET
P.O. BOX 83720
BOISE, ID 83720-0044
(208) 332-8100 or 1-877-997-7664

FORM 1: GENERAL OPERATIONAL INFORMATION

Type of Application (Please check one): New Application Amended

SECTION 1: INSURANCE APPLICANT INFORMATION

Insurance Applicant Name _____
(THE NAME ENTERED WILL APPEAR AS THE NAMED INSURED ON THE INSURANCE POLICY)

Mailing Address _____

City _____ State _____ Zip _____

Phone (____)____-____ Fax (____)____-____ Email _____

Tax Identification Number _____

Contact Name _____ Title _____

SECTION 2: OPERATIONAL INFORMATION

1. Entity Type (Check most appropriate one.)

- | | | |
|------------------------------------------|------------------------------------------------------|---------------------------------------------------|
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Limited Liability Co. (LLC) | <input type="checkbox"/> School District |
| <input type="checkbox"/> Partnership | <input type="checkbox"/> State Dept/Agency | <input type="checkbox"/> Irrigation District |
| <input type="checkbox"/> Sole Proprietor | <input type="checkbox"/> City or Municipality | <input type="checkbox"/> Independent Tax District |
| <input type="checkbox"/> Joint Venture | <input type="checkbox"/> County | <input type="checkbox"/> Non-Profit Organization |

Other _____

2. Tank Owner/Operator Category (Check all those that apply.)

- Owner/Operator of 1-100 Underground Tanks
 Owner/Operator of 101 or more Underground Tanks
 Owner/Operator of Above Ground Tanks
 Non-marketer (consumption of 10,000 gallons per month or less)

3. Do you or a member of your business organization have an insurance policy with the Petroleum Clean Water Trust Fund? Yes No If yes, list the company name and policy number: _____



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FORM 2: SITE SPECIFIC DOCUMENTATION

Fill out a separate Form 2 for each site.

Notice: Petroleum Storage Tank Fund (PSTF) will return your application if the information is not complete.

Site/Facility ID#: _____ (Assigned by Idaho Department of Environmental Quality - IDEQ)

If no Site/Facility ID#, please provide date you applied for an ID#: ____/____/____

Existing Policy with PSTF? [] Yes [] No. If yes, Policy # _____

Owner Name: _____

Operator Name (If operator different from owner): _____

A. Site Address

- Trade or Business Name of this Site or Facility _____
 Street Address _____
 City _____ State _____ Zip _____
 Phone (site) (____)____-____ Fax (site) (____)____-____

- If tanks located on Indian Reservation/Trust Lands, please select one of the following options:
 [] Not tribe owned or-tribe operated
 [] Tribe owned and operated
 [] Operator tribe member
- Petroleum stored is for [] resale [] self consumptive use
 If self-consumptive use, report gallons consumed (throughput) for the last 12 month period _____

B. Site Operations

1. Describe your site operation as it pertains to the use of your petroleum storage tanks.

- 2. Typical Types of Operations Conducted at This Site (Check all those that apply.)**
- | | | |
|-----------------------------------------------------|----------------------------------------------------|-------------------------------------------------------|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Garage/Shop/Maintenance | <input type="checkbox"/> Road/Street/Highway/Bridge |
| <input type="checkbox"/> Aviation | <input type="checkbox"/> Heating Plant/Facility | <input type="checkbox"/> Truck Transport/Distribution |
| <input type="checkbox"/> Auto Dealer/Rental/Garage | <input type="checkbox"/> Manufacturing/Production | <input type="checkbox"/> Utility-Public/Private |
| <input type="checkbox"/> Bus/Transportation | <input type="checkbox"/> Park/Recreation | <input type="checkbox"/> Waste Treatment/Landfill |
| <input type="checkbox"/> Contractor/Construction | <input type="checkbox"/> Petroleum Distribution | |
| <input type="checkbox"/> Emergency Power Generation | <input type="checkbox"/> Retail Petroleum Facility | |

1. Has operator and appropriate staff participated in Department of Environmental Quality's training program pertaining to the operation and management of regulated underground petroleum storage tanks?

YES NO If yes, date completed ___/___/___ (mm/yyyy)

C. Vicinity Information

1. Are there any water wells on site? Yes No

If Yes, please specify type of well(s): Irrigation Potable Both

2. Are there any known off site private, industrial, community, or municipal potable drinking water wells or distribution systems (piping) within 1000ft of this site?

	Irrigation	Potable	Both
Community			
Industrial			
Private			

3. Indicate land use immediately adjacent to this site. (check all combinations that are relevant to this site)

Commercial Residential Rural

4. Estimated distance in feet to any lakes, creeks, rivers, storm sewers, irrigation ditches, or wetlands?

Water Proximity

	Distance in Feet
Creek	
Irrigation Ditch	
Lake	
River	
Storm Sewers	
Wetland	

D. Site Plan (Note: One copy of the site plan must be submitted with the application.)

1. Instructions for Site Plan:

- a. Submit one copy of site plan: either an existing engineering plan, if available, or a neat and legible hand-drawn site sketch with scale.
- b. The site plan must show property boundaries, buildings, and location of all storage tanks, dispenser, monitoring wells, on site surface drains.
- c. The plan must show location and distances that tanks, buildings and dispensers are from this site's property boundaries and storm drains.
- d. distance from each property line to nearest occupied building/structure

E. Contact Information (Someone within your operation or petroleum service co. who can verify the information contained in this application.)

Name _____ Title _____

Street Address _____

City _____ State _____ Zip _____ Phone (____) ____ - _____

F. Tank Types on Site

Note: An AST is an UST if the volume of stored petroleum is 10% or more underground, including both tank and pipe contents. If you are unsure, please contact your service company.

- 1. Aboveground Storage Tanks (AST) []
- 2. Regulated Underground Storage Tanks (UST) []

G. Application for Insurance for the Following Tank Types (Mark tank type)

- 1. Applying for Insurance on ASTs []. (Complete Schedule A)
- 2. Applying for Insurance on USTs []. (Complete Schedule U)

H. If applying for an AST tank, please complete the following questions pertaining to your Spill Prevention, Control and Countermeasure (SPCC) plan:

- 1. SPCC plan is in place for this site? [] YES [] NO
- 2. Site is exempt from SPCC requirements? [] YES [] NO
- 3. SPCC inspections or maintenance procedures are performed as required? [] YES [] NO
- 4. Date of Most Recent SPCC Plan / /

IMPORTANT: READ THIS SECTION CAREFULLY BEFORE SIGNING

I certify under penalty of law that I have examined the information submitted in this application and all attached documents and that I believe the information to be true, accurate, and complete. I understand that submitting this application and any accompanying or supplemental materials does not bind me to accept an offer of insurance from the Idaho Petroleum Storage Tank Fund (PSTF) and does not bind PSTF to offer a contract of insurance. I understand that if I am accepted and approved for insurance by PSTF, this application, any attached documents and any supplemental application forms and reports will be incorporated by reference into the contract of insurance issued by PSTF.

I authorize PSTF or its representatives to enter onto the sites described in this application for the purpose of conducting any investigations or tests (including drilling for purposes of soil, soil vapor, or groundwater sampling) that PSTF deems necessary to evaluate this application. I understand that denying PSTF personnel or PSTF representatives reasonable access to the sites described in this application for investigative or testing purposes may result in the denial of this application for insurance.

I authorize PSTF to obtain loss information from any of my previous or present insurers.

NOTICE OF APPLICANTS: Any person who makes a false statement or representation of a material fact, knowing it to be false, or who knowingly fails to disclose a material fact in any application, examination, or statement required under the Idaho Petroleum Clean Water Trust Fund Act is subject to a fine of up to \$1,000 and imprisonment for up to one year. Idaho Code, Section 41-4941.

Signature of Owner or Operator or Authorized Legal Representative

Date

SCHEDULE A: ABOVEGROUND PETROLEUM STORAGE TANK SYSTEM APPLICATION (AST)

Note: If there are more than 6 storage tanks at this site location, make additional copies of SCHEDULE A before filling in any data. The number you assign to each tank should remain with that tank while insured with PSTF.

Notice: PSTF will return your application if you fail to properly respond to questions 1 through 10.

Enter an "X" in each tank column which best describes your tank system. Some responses require a specific answer, a date or a yes/no response.

AST Designated Tank Number	No. ___	No. ___	No. ___	No. ___	No. ___	No. ___
1. Tank Capacity and Configuration						
Install Date	___/___/___	___/___/___	___/___/___	___/___/___	___/___/___	___/___/___
Orientation: Horizontal (H) or Vertical (V)						
Tank Capacity (in gallons)						
Temporarily Out of Service (List date taken out of service)	___/___/___	___/___/___	___/___/___	___/___/___	___/___/___	___/___/___
2. Tank Material						
Bare Steel						
Bare Steel w/Interior Lining						
Convault Type Tank						
Double Walled Bare Steel						
Epoxy Coated Steel						
Unknown						
If tanks are manifolded together, identify manifolded tanks by number (example: 1 & 2; 4 & 6).						
3. Tank Eligibility						
Tank system complies with federal, state, and local petroleum storage tank rules and regulations, including fire code.						
Date of most recent tank tightness test. Attach copy of test results.	___/___/___	___/___/___	___/___/___	___/___/___	___/___/___	___/___/___
4. Substance Currently Stored						
Aviation Fuel						
Biodiesel 20% or Less Bio						
Biodiesel 21% to 99% Bio						
Biodiesel 100%						
Diesel						
E85 Ethanol						
E95 Ethanol						
Gasohol/E10						
Gasoline						
Hydraulic Oil						
Heating Oil						
Jet Fuel						
Kerosene						
Motor Oil						
Used Oil						
Waste Oil						
Other - explain at end of Schedule A						
5. Secondary Tank Containment (Multiple answers possible per tank system.)						
Not Applicable – Convault Tank						
Tank Release Contained in Dike						
Tank Releases Contained in Remote Impoundment						
Containment area will hold 110% of petroleum released from largest tank for 72 hrs.						
Containment Floor Concrete						

AST Designated Tank Number	No. _____	No. _____	No. _____	No. _____	No. _____	No. _____
Containment Floor Native Earth						
Containment Floor Non-permeable Earth						
Containment Floor Non-permeable Synthetic Barrier						
Containment Walls Concrete						
Containment Walls Native Earth						
Containment Walls Non-permeable Earth						
Containment Walls Synthetic Barrier						
Containment free of flammable and combustible material, other chemicals, etc.						
Other - explain at end of Schedule A						
6. Spill/Leak Prevention						
Shear Valve at Dispenser						
Tank Equipped with Fire Valve						
Tank Equipped with Manual Shut Off Valve						
Tank Equipped with One Way Check Valve on Fill pipe						
Tank Equipped with Solenoid/Anti-gravity Valve						
Tank is visually inspected regularly.						
Other - explain at end of Schedule A						
7. Release Detection - Tank						
Automatic Tank Gauging (ATG)						
Ground Water Monitoring						
Interstitial Double Wall						
Monthly Inventory Control Only						
Monthly Inventory Control & Annual Tank Tightness Test						
Statistical Inventory Reconciliation						
Tank resting on engineered surface to allow visual inspection of release from tank bottom.						
Vapor Monitoring						
Other - explain at end of Schedule A						
8. Pipe Information						
Product Line is Gravity Fed						
Product Line is Pressurized by Turbine						
Product line is Suction System						
Pipe Material – Aboveground Pipe (Multiple answers possible per tank system.)						
a. Bare Steel						
b. Bare Steel Double Walled						
c. Bare Steel Cathodic Protected						
d. Bare Steel Secondary Containment						
e. Copper						
f. Single Wall – Fiberglass/Poly						
g. Fiberglass/Poly in Secondary Containment						
h. Double Walled Fiberglass/Poly						
i. Galvanized Steel Double Walled						
j. Galvanized Steel Cathodic Protected						
k. Galvanized Steel						
l. Other - explain at end of Schedule A						
Pipe Material – Underground Pipe						
Do you have underground petroleum piping	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Record the estimated distance in feet the line is underground						
List the alpha letter (from above Pipe Material list) that describes the underground pipe						
9. Release Detection – Line, Piping						
Groundwater Monitoring						

