

DEPARTMENT OF PLANNING AND DEVELOPMENT REVIEW
BUREAU OF PERMITS AND INSPECTION
ROOM 110 CITY HALL
900 E. BROAD STREET
RICHMOND, VIRGINIA 23219
PHONE (804) 646-4169

TANK PERMIT APPLICATION

| | TRACK 1 |
|---------------------|---------|
| PERMIT NO. | |
| | |
| | |
| <i></i> | |
| BUILDING PERMIT NO. | |
| | |
| | |
| | |

THIS IS AN APPLICATION <u>ONLY</u>. IT IS NOT AUTHORIZATION TO START ANY WORK. NO WORK SHALL START UNTIL A PERMIT IS POSTED ON THE JOB SITE.

| | | | | | | ΠI | UNTIL | AP | - 11 | MII IS P | U31 | בט טו | 4 1H | | | | | |
|------------------------------|---------------------------|----------------------------------|---------------|------------------|-----------------|-----------|---------------------|---------------|------------|----------------------------------|----------------|-----------------|--------------------|-----------------|----------------|------------|------------------------------|---------------|
| | 1 JOB/PRO | OPERTY ADDRES | S (STREET | & NUMBEI | 3) | | | | | | | | | 2 | FLOOR/RO | DOM NO. | | |
| WNER ON | 3 CONTRA | CTOR NAME | | | | | | | | 4 LICENSE TYPE | | | CLASS | 6 | STATE LIC | ENSE NO |). | |
| CONTRACTOR/OWNER INFORMATION | 7 CONTRA | CTOR STREET A | DDRESS | | | | | | ' | 8 CONTRACT | OR TELEF | PHONE NO. | | | | | | |
| CONTRA | 9 CITY | | | | | | STATE | | | ZIP (| CODE | • | • | CONTRA | CTOR FAX N | 10. | | |
| | 1 PROPER | TY OWNER NAME | <u> </u> | | | | 1 PROF | PERTY OW | /NER | ADDRESS/ZIP | | | | B 01 | WNER DAYT | IME TELE | PHONE NO. | |
| | 14 DESCRI | BE CURRENT STF | RUCTURE U | JSE | | | | | | 15 DESCRIBE PRO | OPOSED S | TRUCTURE | USE | | | | | <u> </u> |
| BUILDING INFORMATION | OFFICE | NEW ACCESSORY | , [| 1 ADDITI | ON | 18 R | ESIDENTIAL ARAGE | | RES | SIDENTIAL CK | 20 OPEI POR | OH . | a | ENCLOS PORCH | ED | ~ R | LTER/ EMODEL | |
| INFOR | USE | BLDG. ACC ACC ALTER/ | | ADD ADD DEMOL | ITION | AD1 | ENANT | AD | | UNDATION ONLY | AD3 NEW | BUILDING | AD ² | MOVING | i/ | AL1 | GHT EPAIR/ | |
| UILDING | ONLY | REMODEL HEAVY AL2 | D | DEM | | FUP | ITUP | FO | Ū | | □ NB | | REL | RELOCA | ATION | REP | EPLACEMENT | |
| " | 30 IF 1 OR 2 FAMILY | 1 FA | ATTACHE | D 2 FAMIL | | DETACH | HED 2 FAMILY | | MBER | FAMILY, R OF UNITS RUCTURE | | O CHECK | K ONE PLICABLE, | / | DDGING HO | | 3. ADULT CARI RESIDENCE | |
| COST | (3) TOTAL | VALUE OF CON | TRACT INC | CLUDING I | MATERIAL, LAE | BOR, SI | UBCONTRACS | S OVERHE | EAD A | AND PROFIT | | \$ | | | | | | |
| PTION | 34 DESCRI | BE SCOPE OF WO | PK | | | | | | | | | | | | | | | _ |
| WORK DESCRIPTION | | | | | | | | | | | | | | | | | | |
| | 33 CONTAC | T PERSON | | | | | | | | | € CON | TACT PHONI | E NO. | | 37 CON | ITACT FA | X NO. | <u> </u> |
| CT ATION | 38 CONTAC | T ADDRESS | | | | | | | | ZIP CODE | | 39 | EMAIL | | | | | |
| CONTACT | 40 DO YOU PICK UP | WANT TO BE CAL PERMIT WHEN IS | SSUED? | ☐ YES ☐ NO | 1 | NAME | | | | | | | | | PHONE N | O. | | |
| Ī | 41 ENGINE | ER NAME | | | 4 ENGIN | NEER PI | HONE NO. | | ∄ □ | ENGINEER FAX NO. | | 44 | EMAIL | | | | | |
| | QUANTIT | Y TANK MATERIA | | PACITY LLONS) | ABOVE O | | HEIGHT (| | | NS (IF ABOVE LENGTH (FT) | | D) OR DIAMET | R (FT) | | | | ED IN TANK? L, OIL, PROPA | ANE) |
| | | | | | | | | , | | , | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| E E | | | | | | | | | | | | | | | | | | |
| O BE DC | | | | | | | | | | | | | | | | | | |
| NORK T | | | | | | | | | | | | | | | | | | |
| TYPE OF WORK TO BE DONE | | | | | | | | | | | | | | | | | | |
| F | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | |
| | 43 ADDITIO | NAL INFORMATIO | DN: | | | | | | | | | | | 46 | | | PLAN ATTACHE | D? |
| E | | | | | | | | | | RESPONSIBILITY 1 | | | JILDING P | PERMIT - | ☐ YES OWNER ST | ATEMEN | | HE |
| OWNERS STATEMENT | LINK BELOV | V AND SUBMIT T | HIS WITH | | | | | | | ONEDRIVE OR SU 2-06/BuildingP | | | ment.po | <u>df</u> | | | | |
| X | | | | | | | | | | | | | | | | | | <u> </u> |
| ASBESTOS CERTIFICATION | A | DECTED OD MEETS T | THE EVPEDTION | | F APPLICANT) | DCINIA II | NIEODM STATEM | IDE BIIII DIN | | B CERTIFY THAT | | | AS DED DEO | | ESSES, FLO | | | |
| ESTOS CE | STANDARD FO | R THE HAZARDOUS | AIR POLLUTA | ANT (NESHAF | S) AND OSHA "ST | TANDARE | OS FOR CONSTRU | ICTION WOF | RKERS' | DE. THE ASBESTOS AB. ". | ATEMENT W | ILL BE DUNE | 45 FEN NEW | UINEWENT | OF THE GLEA | AN AIN ACT | NATIONAL EIVIS | SIUN |
| Ž | ARTS DISTR | ICT | | | SIGNATURE | | VIOLA | TION ON I | PROP | ERTY | DELINQ | JENT TAXES | DUE? | | ICC TYPE | OF CONS | STRUCTION | $\overline{}$ |
| ONLY | EXISTING U | YES NC | | SED USE G | | NO FEE | CALC. TYPE | ☐ YE | | □ NO MIT FEE F | FEE RECE | YES | □ NO. | | CASH | CHECK | CREDIT C | ARD |
| E USE | IS PROPERT | | FLOOD E | ELEV. | | SITE | E ELEV. | ВСС | | CHESAPEAKE E | BAY PROTI | ECTION ARE | A? | CHESAF | PEAKE BAY I | MANAGE | MENT AREA? | |
| OFFICE USE ONLY | ☐ YES | | | | | | DATE | | | APPLICATION DIS | | NO D BY | | | ☐ YE | S [| NO DATE | |
| | | | | | | | | | | | | | | | | | | |

BY SUBMITTING THIS APPLICATION, I CERTIFY I AM IN COMPLIANCE WITH THE CODE OF VIRGINIA, SECTION 54.1-1100 ET SEQ; RULES AND REGULATIONS OF THE VIRGINIA BOARD OF CONTRACTORS AND CHAPTER 14, CODE OF THE CITY OF RICHMOND.

FEE SCHEDULE . BASED ON VALUE OF CONTRACTOR'S ESTIMATE OR ESTIMATE CALCULATED BY R.S. MEANS, WHICHEVER IS HIGHER AMOUNT.

*Add a 2% state surcharge to the final calculated fee.

VALUE OF WORK INCLUDES LABOR, MATERIALS, SUBCONTRACTS, OVERHEAD AND PROFIT. THE FEE IS BASED ON CONTRACTOR'S ESTIMATE *OR* ESTIMATE CALCULATED BY R.S. MEANS, WHICHEVER IS HIGHER AMOUNT.

| RESIDENTIAL ON | LY - 1 & 2 FAMILY | COMMERCIAL ONLY | | | | | |
|--------------------------------------|---------------------------------------|--|------------|--|--|--|--|
| VALUE OF WORK | PERMIT FEE | VALUE OF WORK | PERMIT FEE | | | | |
| \$0 - \$2000 | \$63.00 | \$0 - \$2000 | \$131.00 | | | | |
| OVER \$2000 | \$63.00* | OVER \$2000 | \$131.00* | | | | |
| *Add \$6.07 per thousand or fraction | thereof for residential construction. | * Add \$8.50 per thousand or fraction thereof for commercial construction. | | | | | |

*Add a 2% state surcharge to the final calculated fee.

| CODE | DESCRIPTION | CODE | DESCRIPTION | CODE | DESCRIPTION | CODE | DESCRIPTION |
|-----------------|-------------------------|------|--------------------------|------|---------------------------------|------|---------------------------------------|
| A1A | THEATER/STAGE | B5 | FIRE STATION | H5 | HIGH HAZARD | NU | NO USE SANCTIONED VACANT STRUCTURE |
| A1B | THEATER NO STAGE | B6 | FUNERAL HOME | l1 | GROUP HOMES 17 OR MORE | R1M | MOTEL |
| A2A | NIGHTCLUB | B7 | LAUNDRY | I2A | INSTITUTIONAL INCAPACITATED | R2A | DORMITORIES |
| A ^{2B} | RESTAURANT EAT IN | B8 | MEDICAL OFFICE | I2B | INSTITUTIONAL DAY NURSERY | R2B | MULTIFAMILY |
| A3B A3C | MUSEUM/ART GALLERY | B9 | OFFICE | 13 | DETENTION FACILITY | R2C | LODGING HOUSES |
| A3C | LIBRARY | B10 | BUSINESS - OTHER | 14 | ADULT CARE FACILITY | R3A | 1&2 FAMILY OVER 3 STORIES |
| A3D | PASSENGER TERMINAL | E1 | EDUCATION/SCHOOL 1 TO 12 | I4B | CHILD CARE >5 CHILDREN <2.5 YRS | R5A | SINGLE FAMILY ATTACHED UNDER 4 STORIE |
| A3F | LECTURE HALL | E2 | DAYCARE OVER 2 1/2 YEARS | MU | MIXED USE | R5B | TWO FAMILY ATTACHED UNDER 4 STORIES |
| A3H | CHURCH | F1 | FACTORY MODERATE HAZARD | M1 | RETAIL CONVENIENCE STORE | R5C | SINGLE FAMILY DETACHED UNDER 4 STORIE |
| A4A | RECREATION CENTER | F2 | FACTORY LOW HAZARD | M2 | RETAIL DEPARTMENT STORE | R5D | TWO FAMILY DETACHED UNDER 4 STORIES |
| B1 | AUTO DEALERSHIP | H1 | HIGH HAZARD | M3 | RETAIL SUPERMARKET | R4A | ASSISTED LIVING 5 TO 16 PEOPLE |
| B2 | DENTIST/DOCTOR'S OFFICE | H2 | HIGH HAZARD | M4 | RETAIL STORE | S1 | STORAGE MODERATE HAZARD |
| В3 | BANK | Н3 | HIGH HAZARD | M5 | RETAIL AUTO SERVICE STATION | S2 | STORAGE LOW HAZARD |
| B4 | CAR WASH | H4 | HIGH HAZARD | R1H | HOTEL | U | TEMPORARY/MISC |
| STE | STEEL | | | | | | |
| STE FSW | FIBERGLASS SINGLE WALL | | | | | | |

INSTRUCTIONS ON FILLING OUT AN TANK PERMIT APPLICATION

At the top right hand corner of the application is a capital T. This is the space where your permit number will be written after you have paid for the permit. There is also a capital B, this is where you will write any building permit number that is associated with the tank permit application.

Box #1 - Fill in the number & street address where the work is being done.

FIBERGLASS DOUBLE WALL

FDW

- **Box #2 -** This is to be used on multi-story commercial and multi-family residential projects. It can be left blank on single family and duplex permit applications.
- **Box #3** Fill in the name of the contractor doing the work or your name if you are the owner/tenant and are applying for the permit as the owner/tenant.
- **Box #4 -** Fill in the classification that is on your contractor's license such as H/H.
- **Box #5 -** Check the class of license located on your contractor's license.
- **Box #6** Fill in state board of contractor's license number. It will always begin with 2701 or 2705 and be followed by six digits. Do NOT use a license number that begins with 2710 as this is a tradesman card number and does not allow you to apply for a permit
- **Box #7 -** Fill in the contractor's street address.
- **Box #8 -** Fill in the contractor's telephone number.
- **Box #9 -** Fill in the contractor's city, state and zip code.
- **Box #10 -** Fill in the contractor's fax number.
- **Box #11 -** Fill in the name of the property owner.
- **Box #12 -** Fill in the property owner's address.
- **Box #13 -** Fill in the property owner's daytime phone number.
- **Box #14 -** Fill in the current use of the property such as restaurant, single family dwelling, duplex, etc.
- **Box #15 -** Fill in the proposed use of the property such as restaurant, office, duplex, etc.
- Boxes #16 through #29 Office use only.

- **Box #30 -** Fill in when dealing with single family houses and duplexes. Note the detached and attached designation. If the house stands alone and does not touch the house on either side, it is detached.
- **Box #31 -** Fill in the number of apartment units in the building.
- **Box #32 -** Check the appropriate box, if applicable.
- **Box #33 -** COST INFORMATION Fill in the cost of all labor, materials, overhead, subcontracts and profit. This may be used to determine how much you pay in permit fees.
- **Box #34 -** Give a brief description of the work to be done.
- **Box #35 -** Fill in the name of the person to contact if there are questions about the application or drawings.
- **Box #36 -** Fill in the contact person's phone number.
- **Box #37 -** Fill in the contact person's fax number.
- **Box #38 -** Fill in the contact person's complete address.
- **Box #39 -** Fill in the contact person's e-mail, if available.
- **Box #40** Check whether or not you would like to be called to pick up the permit. If you check "yes", fill in your name and phone number.
- **Box #41 -** If submitting drawings done by an engineer please fill in their name here.
- **Box #42 -** Fill in the Engineer's phone number.
- **Box #43 -** Fill in the Engineer's fax number.
- **Box #44 -** Fill in the Engineer's e-mail address.

Under: **TYPE OF WORK TO BE DONE** - Please list each tank that is to be installed separately on form.

- **Quantity** Is the total number of tanks that will be placed on a property.
- **Tank Material -** Is the construction of the tank. Fill in the appropriate abbreviation for the tank material from the list on the back of the form.
- **Capacity -** Is the volume in gallons that the tank can hold.
- **Aboveground -** Aboveground Storage Tank (A.S.T.) is how the tank will be installed on the property.
- **Underground -** Underground Storage Tank (U.S.T.) is how the tank will be installed on the property.
- **Height -** Is how tall the tank will be from finished grade.
- **Length -** Is how long the tank is from end to end.
- **Width -** Is how wide the tank is from side to side.
- What will be stored in the tank Is the substance that will be contained within the tank. (Gasoline, Kerosene, Diesel, Oil, Propane, Etc.)
- **Box #45 ADDITIONAL INFORMATION** Is information that may indicate various situations for a particular job.
- **Box #46 -** Check whether or not a survey or site plan is attached.
- Box #A, B & C Fill out the asbestos certification with the Applicant's name, property address and signature, if renovating an existing commercial structure. (This section is not applicable to residential structures of 4 units or less.)

OFFICE USE ONLY – DO NOT WRITE IN THIS AREA

DCD02T (B) (Rev. 06/23) 112038-6