



STORAGE TANK LEAK DETECTION INSTALLATION OR UPGRADE APPLICATION / NOTIFICATION

Bureau of Weights & Measures
Permit & Licensing Section
P.O. Box 7837
Madison, WI 53718-7837
262-523-3044

INSTRUCTIONS: This form is to be submitted to the Department of Agriculture, Trade & Consumer Protection (DATCP) along with the plan submittal for new installations, or submitted independently for conversions of existing systems from one leak detection methodology to another or upgrade of existing methods, equipment or software along with the respective startup tests (ATG) or precision test (SIR). For existing equipment, submit this form within five days of installation to DATCP at the address in the upper right corner of this page.

Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04(1)(m)].

OWNER INFORMATION Customer ID# Name		PROJECT INFORMATION Site ID# Facility ID# Facility Name		CONTRACTOR INFORMATION Customer ID# Contractor Name	
Company Name		Site Address		Number and Street	
Number and Street		<input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town of:		City, State, Zip Code	
City, State, Zip Code		County		Contact Person	
Telephone Number ()	Fax Number ()	Fire Dept. Providing Fire Coverage	FDID#	Telephone Number: E-mail:	

THIS FORM IS SUBMITTED: Pre-Installation: Date projected to be installed: _____ Post Installation: Date Installed: _____

TANK SPECIFICATIONS: Underground Aboveground Manufacturer: _____

Leak Detection Equipment Manufacturer: _____

WI Material Approval No. : _____

Software Version, if applicable: _____

TANK INFORMATION *Tank Leak Detection Upgrade Only*

Reg. Obj #:							
Tank size:							
Product:							
Interstitial Monitoring (Y) Yes (NA) Not Applicable							
Probe Type: (U) ultrasonic, (M) magnetostrictive, (C) capacitance							
Probe Model Numbers:							
Minimum product level for test - Indicate %, inches or gallons:							
Console Name Designation/ Model Number:							
Monthly estimated throughput for Continuous ATG or SIR systems:							
Is tank manifolded to another tank? Indicate reg obj number of the other tank.							
Does the manifold line include an isolation valve to isolate the line? Indicate Y/N							

PIPE INFORMATION

Configuration: Single wall Double wall **Type:** Steel Fiberglass Flexible Other (*Specify*): _____
System Type: Pressurized piping with (A. auto shutoff; B. alarm or C. flow restrictor
 Suction piping with check valve at tank Suction piping with check valve at pump and inspectable

Leak detection method: Electronic line monitoring Model: _____ Tightness testing
(Pick one method only) Interstitial monitoring Model & Probe: _____

Is line manifolded to another line? Indicate reg obj number of the other tank.							
Does the manifold line include a check valve to isolate the line? Indicate by (N) No, (UD) Under Dispenser, (TT) Tank Top, or (O) Other							
Are sump sensors installed?							
Line size (diameter):							
Total length of pipe:							

Comments: _____

FEES: (Fee table on reverse side)	Plan Review	Inspection	Total
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Addition OR Upgrade for leak detection \$ _____ (7636) \$ _____ (8253) \$ _____

I certify by signature that provisions of the current SPS 310 Flammable and Combustible Liquids Code 40 CFR Part 280, manufacturer's instructions and DSPS Material Approval are complied with.

Signature

Date

For Office Use Only

Transaction #:

- Plan Review
- Copy to Inspector
- Copy to Permit

STORAGE TANK LEAK DETECTION INSTALLATION OR UPGRADE APPLICATION / NOTIFICATION

Completing this form:

This form is to be completed when installing a new method of leak detection or when modifying or upgrading the existing leak detection methodology or equipment. This form is to be submitted to the Department of Commerce along with the plan submittal for new installations, or submitted independently for conversions of existing systems. For leak detection modification to existing equipment, submit this form within five days of installation to the Department of Commerce at the address in the upper right corner of the first page.

This form is designed to provide the pertinent information relating to ATG, Interstitial and SIR tank leak detection methodologies, as well as the various product pipe leak detection methodologies. The fill-in blanks and questions will not always apply to a specific methodology and can be left blank or marked NA. The following items are provided as a guide to completing this form:

- ◆ Leak Detection Equipment Manufacturer section will apply to any equipment or SIR vendor.
- ◆ Software version section will apply to any electronic monitoring or SIR related software that is installed on a PC or control device at the facility.
- ◆ Tank leak detection method is the method that the system is implementing
- ◆ Probe Type & Probe Model Number sections apply to ATG and SIR when the inventory data is via a probe rather than a stick reading.
- ◆ Minimum product level for test section is the threshold that the methodology vendor and respective material approval designate. The option is gallons, percentage or inches, but should correlate with the reading that is printed on a tape.
- ◆ Monthly estimated throughput for CSLD or SIR systems section is a figure that the owner/operator will furnish. The operator should have a projection for new systems.
- ◆ "Is line manifolded" in the Pipe Information section needs to be completed only if a tank line is manifolded to another tank line. The entry must be the regulated object number of the other tank.
- ◆ When using a check valve in the manifolded line or a submersible pressure relief, provide the set point pressure of the relief valve.
- ◆ Total length of pipe section is the length of pipe associated with each line leak detector

This form is designed for the typical configurations and application of leak detection methodologies. It is likely that unique or non-typical system configurations will be experienced. Remarks in the "Comment" section would be appropriate.

This form must be signed by the technician or person responsible for performing the equipment installation or assessing the facility attributes to implement the transition from one leak detection methodology or one vintage of an existing methodology to another.

Submittal Fee:

Upgrade, exchange or conversion of existing leak detection methodology to another approved methodology or manufacturer.

	Plan Review Fee	Installation Inspection Fee	Plan Revision Fee	Re-inspection Fee
When submitted independent of a broader plan submittal application	\$35	\$100 Except conversion to SIR	\$100	\$100