

Petroleum Bulk Storage Application

Pursuant to the Environmental Conservation Law: Article 17, Title 10; and
Regulations 6 NYCRR Part 613 and 6 NYCRR Subpart 374-2

Return Completed Form & Fees To:



PBS Number:

(Please Type or Print Clearly and Complete All Items for Sections A, B & C)

Section A - Facility/Property Owner/Contact Information

Expiration Date:

Transaction Type: <input type="checkbox"/> 1) Initial/New Facility 2) Change of Ownership 3) Tank Installation, Closing, or Repair 4) Information Correction 5) Renewal	F A C I L I T Y	Facility Name:		Tax Map Info		TYPE OF PETROLEUM FACILITY (Check only one) <input type="checkbox"/> 01=Storage Terminal/Petrol. Distributor <input type="checkbox"/> 02=Retail Gasoline Sales <input type="checkbox"/> 03=Other Retail Sales <input type="checkbox"/> 04=Manufacturing <input type="checkbox"/> 05=Utility <input type="checkbox"/> 06=Trucking/Transportation/Fleet <input type="checkbox"/> 07=Apartment/Office Building <input type="checkbox"/> 08=School <input type="checkbox"/> 09=Farm <input type="checkbox"/> 10=Private Residence <input type="checkbox"/> 11=Airline/Air Taxi/Airport <input type="checkbox"/> 12=Chemical Distributor <input type="checkbox"/> 13=Municipality <input type="checkbox"/> 15=Railroad <input type="checkbox"/> 25=Auto Service/Repair (No Gasoline Sales) <input type="checkbox"/> 28=Cemetery/Memorial <input type="checkbox"/> 26=Religious (Church, Synagogue, Mosque, Temple, etc.) <input type="checkbox"/> 27=Hospital/Nursing Home/Health Care <input type="checkbox"/> 52=Marina 53=Nuclear Power Plant <input type="checkbox"/> 99=Other (Specify):	
		Facility Address (Physical Address, No P.O. Boxes):		Block:			
		Facility Address (cont.):		Lot			
		City:	State: NY	ZIP Code:			
		County:	Township/City:	Facility Phone Number:			
Facility Operator:		Emergency Contact Name:		Emergency Telephone Number:			
NOTE: Fill in Property Owner information here....>>>> Indicate Tank Owner in Section C.	O W N E R	Facility (Property) Owner (from Deed):				I hereby certify, under penalty of law, that all of the information provided on this form is true and correct. False statements made herein may be punishable as a criminal offense and/or a civil violation in accordance with applicable state and federal law. Name of Owner or Authorized Representative: Amount Enclosed: \$ Title: Signature: Date:	
		Facility Owner Address (Street and/or P.O. Box):					
		City:	State:	ZIP Code:			
		Owner Telephone Number:					
		Type of Owner (check only one):	3 <input type="checkbox"/> Local Government				
1 <input type="checkbox"/> Private Resident	4 <input type="checkbox"/> Federal Government						
2 <input type="checkbox"/> State Government	5 <input type="checkbox"/> Corporate/Commercial/Other						
Official Use Only Date Received: ____/____/____ Date Processed: ____/____/____ Amount Received: \$_____ Reviewed By: _____ Rev. 6/26/2019	C O R R E S P O N D E N C E	(Please keep this information up to date.)					
		Facility Contact Person Name:					
		Contact Person Company Name:					
		Address:					
		Address (cont.):					
		City/State/ZIP Code:					
		Tel. Number:			eMail Address:		

PBS Number:

Section B - Tank Information

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(Please use the key located on the last page to complete each item/column)

Registration Expiration Date:

[illegible]

Note: If you need to add tanks to your registration, write them in using blank lines above. Attach additional sheets as needed.

Blank Section B is available at http://www.dec.ny.gov/docs/remediation_hudson_pdf/pbsrenewal.pdf

PBS Number:

Petroleum Bulk Storage Application

Section C - Tank Ownership Information (for PBS tanks listed in Section B

Tank Owner Information

☐ Check box if same as Facility (Property) Owner.
If tank owner is different from property owner, fill out information below:

Tank Owner Name (Company/Individual):

Contact Person:

Tank Owner Address:

City:

State:

ZIP:

Contact Person Telephone Number:

Contact Person email:

Specific Tanks Owned

☐ Check box if this owner owns all tanks at this facility.
If not, list tanks owned by this owner below:

Tank Number:

Name of Class B (Daily On-Site) Operator:

Authorization No:

Name of Class A (Primary) Operator:

Authorization No:

Tank Owner Information

☐ Check box if same as Facility (Property) Owner.
If tank owner is different from property owner, fill out information below:

Tank Owner Name (Company/Individual):

Contact Person:

Tank Owner Address:

City:

State:

ZIP:

Contact Person Telephone Number:

Contact Person email:

Specific Tanks Owned

☐ Check box if this owner owns all tanks at this facility.
If not, list tanks owned by this owner below:

Tank Number:

Name of Class B (Daily On-Site) Operator:

Authorization No:

Name of Class A (Primary) Operator:

Authorization No:

PETROLEUM BULK STORAGE APPLICATION - SECTION B - TANK INFORMATION - CODE KEYS

Action (1)

1. Initial Listing
2. Add Tank
3. Close/Remove Tank
4. Information Correction
5. Repair/Reline Tank

Tank Location (3)

1. Aboveground-contact w/soil
2. Aboveground-contact w/impervious barrier
3. Aboveground on saddles, legs, stilts, rack or cradle
4. Partially buried tank (tank with 10% or more below ground)
5. Underground including vaulted with no access for inspection
6. Aboveground in Subterranean Vault w/access for inspections

Status (4)

1. In-service
2. Out-of-service
3. Closed-Removed
4. Closed- In Place
5. Tank converted to Non-Regulated use

Products Stored (7)

Heating Oils: On-Site Consumption

0001. #2 Fuel Oil
0002. #4 Fuel Oil
0259. #5 Fuel Oil
0003. #6 Fuel Oil
0012. Kerosene
0591. Clarified Oil
2711. Biodiesel (Heating)
2642. Used Oil (Heating)

Heating Oils: Resale/Redistribution

2718. #2 Fuel Oil
2719. #4 Fuel Oil
2720. #5 Fuel Oil
2721. #6 Fuel Oil
2722. Kerosene
2723. Clarified Oil

Motor Fuels

0009. Gasoline
2712. Gasoline/Ethanol

0008. Diesel
2710. Biodiesel
0011. Jet Fuel
1044. Jet Fuel (Biofuel)
2641. Aviation Gasoline

Emergency Generator Fuels

0001. #2 Fuel Oil
2730. Biodiesel (E-Gen)
2731. Diesel (E-Gen)

Lubricating/Cutting Oils

0013. Lube Oil
0015. Motor Oil
1045. Gear/Spindle Oil
0010. Hydraulic Oil
0007. Cutting Oil
0021. Transmission Fluid
1836. Turbine Oil
0308. Petroleum Grease

Oils Used as Building Materials

2626. Asphaltic Emulsions
0748. Form Oil

Petroleum Spirits

0014. White/Mineral Spirits
1731. Naptha

Mineral/Insulating Oils

0020. Insulating Oil (e.g., Transformer, Cable Oil)
2630. Mineral Oil

Waste/Used/Other Oils

- 0022 Waste/Used Oil
9999. Other-Please list:*

Crude Oil

0006. Crude Oil
0701. Crude Oil Fractions

Tank Type (8)

01. Steel/Carbon Steel/Iron
02. Galvanized Steel Alloy
03. Stainless Steel Alloy
04. Fiberglass Coated Steel
05. Steel Tank in Concrete
06. Fiberglass Reinforced Plastic (FRP)
07. Plastic
08. Equivalent Technology

09. Concrete
10. Urethane Clad Steel
99. Other-Please list:*

Internal Protection (9)

00. None
01. Epoxy Liner
02. Rubber Liner
03. Fiberglass Liner (FRP)
04. Glass Liner
99. Other-Please list:*

External Protection (10/18)

00. None
01. Painted/Asphalt Coating
02. Original Sacrificial Anode
03. Original Impressed Current
04. Fiberglass
05. Jacketed
06. Wrapped (Piping)
07. Retrofitted Sacrificial Anode
08. Retrofitted Impressed Current
09. Urethane
99. Other-Please list:*

Tank Secondary Containment (11)

00. None
01. Diking (AST Only)
02. Vault (w/access)
03. Vault (w/o access)
04. Double-Walled (UST Only)
05. Synthetic Liner
06. Remote Impounding Area
07. Excavation Liner
09. Modified Double-Walled (AST Only)
10. Impervious Underlayment (AST Only)**
11. Double Bottom (AST Only)**
12. Double-Walled (AST Only)
99. Other - Please list*

Tank Leak Detection (12)

00. None
01. Interstitial Electronic Monitoring
02. Interstitial Manual Monitoring
03. Vapor Well
04. Groundwater Well
05. In-Tank System (Auto Tank

06. Impervious Barrier/Concrete Pad (AST Only)
07. Statistical Inventory Reconciliation (SIR)
08. Weep holes in vaults with no access for inspection
99. Other-Please list: *

Overfill Protection (13)

00. None
01. Float Vent Valve
02. High Level Alarm
03. Automatic Shut-Off
04. Product Level Gauge (AST Only)
05. Vent Whistle
99. Other-Please list:*

Spill Prevention (14)

00. None
01. Catch Basin
99. Other-Please list:*

Pumping/Dispensing Method (15)

00. None
01. Presurized Dispenser
02. Suction Dispenser
03. Gravity
04. On-Site Heating System (Suction)
05. On-Site Heating System (Supply/Return)
06. Tank-Mounted Dispenser
07. Loading Rack/Transfer Pump

Piping Location (16)

00. No Piping
01. Aboveground
02. Underground/On-ground
03. Aboveground/Underground Combination

Piping Type (17)

00. None
01. Steel/Carbon Steel/Iron
02. Galvanized Steel
03. Stainless Steel Alloy
04. Fiberglass Coated Steel
05. Steel Encased in Concrete

06. Fiberglass Reinforced Plastic (FRP)
07. Plastic
08. Equivalent Technology
09. Concrete
10. Copper
11. Flexible Piping
99. Other-Please list:*

Piping Secondary Containment (19)

00. None
01. Diking (Aboveground Only)
02. Vault (w/access)
04. Double-Walled (Underground Only)
06. Remote Impounding Area
07. Trench Liner
12. Double-Walled (Aboveground Only)
99. Other-Please list: *

Pipe Leak Detection (20)

00. None
01. Interstitial Electronic Monitoring
02. Interstitial Manual Monitoring
03. Vapor Well
04. Groundwater Well
07. Pressurized Piping Leak Detector
09. Exempt Suction Piping
10. Statistical Inventory Reconciliation (SIR)
99. Other-Please list:*

Under Dispenser Containment (UDC) (21)

Check Box if Present

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* If other, please list on a separate sheet including tank number,

** Each of these codes must be combined with code 01 or 06 to meet compliance requirements.