



APPLICATION

CHULA VISTA FIRE DEPARTMENT

Hazardous Materials Storage Tank AST/UST Removal

Name of Project: _____ **Submittal Date:** _____

Project Address (range): _____

Bldg Permit Number: _____ **Installing Contractor's City of Chula Vista Business License # :** _____

Installing Contractor: _____ **Contractors License # :** _____

Contractor Address: _____ **City:** _____ **State:** _____ **Zip :** _____

Contact Person: _____ **Phone:** _____ **Fax:** _____

Company / Person paying for permit: _____ **Phone:** _____

E-Mail: _____

Fire Permit Number: _____ **Inspector / Area:** _____

Check / Mark if applicable, indicate quantity, multiply with fee amount and type/write subtotal. Add subtotals in TOTAL box.

<input checked="" type="checkbox"/>	#	Haz Mat Storage Tank AST/UST Removal	Fee	x Qty	Subtotal \$
<input type="checkbox"/>	15.1	Haz Mat Storage Tank AST/UST Removal [base fee]	\$80		
<input type="checkbox"/>	15.2	First Tank	\$320		
<input type="checkbox"/>	15.3	Each Additional Tank	\$160		

TOTAL:

1. Removal, relocation, abandonment, placing temporarily out of service or otherwise disposing of hazardous materials tanks.
2. All line items are additive to the base fee.
3. Fees are for either aboveground or underground storage tanks [AST & UST].
4. Fees are established herein for permits that are submitted solely/directly to the Fire Department.

REMIT TO:

Chula Vista Fire Department • Fire Prevention Division
 276 Fourth Avenue • Building C, Suite B-143 • Chula Vista CA 91910 • (619) 691-5029 • fax (619) 691-5204

OFFICIAL USE:

Deposit Account # 1563000-4782 (156304) Accepted by: _____ Date: _____