

AST CERTIFICATION & ENGINEERING ASSESSMENT EXEMPTION NOTIFICATION FOR LARGE QUANTITY GENERATORS OF HAZARDOUS WASTE

ON SITE VERIFICATION: (To be completed by the inspector)		TANK INFORMATION: (One form per tank)	
Facility Name:		Tank Capacity:	
Facility ID FA00:		Contents:	
Site Address:		Secondary Cont. Type:	
City & Zip Code:		Year Installed:	
Date Requested:		U/L Approved (Y/N):	
SMCEH CUPA Insp	on (date):	has verified	d that the hazardous waste tank
 defined in HS0 The primary ta If the tank sys above, be able advises that th requirements. The facility ha 66265.194-19 to prevent spil when there is The cause of section 66265 The tank mus (in good cond 	t be installed and maintained on a non-permeable s ition).	y containment. ainment must, in addition intrusion or flooding prot ch problems, following all ion logs onsite as require propriate controls and pra ry containment should be nent must be thoroughly rective actions taken and urface, i.e. concrete (in g	to the requirement of item 3 blems. SMCEH strongly I local building and zoning ed in 22 CCR sections ctices are in place at all times kept empty and dry,except cleaned out within 24 hours. documented (refer. 22 CCR
The facility should maintain a photocopy of this notification onsite to show to an inspector during facility inspections.			
	oveground used oil/waste antifreeze tank meets for exemption from the Professional Engineering ame: Signature:		
The Local Fire Mar	shal installation, usage, and design approval are tank for conformance with applicable regulation		Il Fire Marshal has reviewed
Fire Marshall Appro	val Name: Signature:		Date:
APPROVAL:			
request for exempti writing to San Mate should maintain a p This approval doe	t change the configuration or location of the tank, th on above. Otherwise, submit a description of any pr o County 30 days prior to making the changes to en hotocopy of this notification onsite. s not exempt your facility from compliance with or Federal agencies with regards to storage of h	oposed changes or modif sure compliance with app additional requirements	fications to the tank system in blicable regulations. The facility s that may be enforced by

SMCEH CUPA Inspector Name:

Signature:

Date:



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INSTRUCTIONS:

Purpose: The purpose of this form is to provide a mechanism for businesses to request an exemption, and for the CUPA to grant the exemption, from the Professional Engineer Assessment for an aboveground storage tank (AST) containing used oil or waste antifreeze.

Procedures: During an inspection of a business which stores used oil or antifreeze in an AST, the San Mateo County Environmental Health (SMCEH) CUPA Inspector shall evaluate the tank to determine if it meets the minimum requirements for the exemption. A separate form should be filed out for each AST qualifying for the exemption.

On site Verification Section: The CUPA Inspector will complete this section of the form after or during the inspection.

- Facility ID: Enter facility's number (FA00XXXXX)
- TANK CAPACITY: Enter the total volume of the tank
- CONTENTS: Enter the name of the chemical held within the tank (used oil or antifreeze only)

• SECONDARY CONTAINMENT TYPE: Enter the type of secondary containment, i.e. double walled tank; 12 inch concrete berm-12' x 8' (include the approximate dimensions); metal tray-4'x8'x11"; etc.

- YEAR INSTALLED: Enter the year that the tank was put into service at its current location
- U/L APPROVED (Y/N): Enter "Y" if it is U/L approved, "N" if it is not

• TANK ID (if applicable): Enter the tank ID number that the facility has issued to the tank. If there is no facility tank number enter "N/A"

- INSPECTOR: CUPA Inspector's name
- DATE OF REQUEST: Enter the date when the facility requested the exemption in writing

Declaration Section: The Owner/Operator needs to sign, print his/her name and date the form under the statement: "I certify that the above ground used oil/waste antifreeze tank meets the requirements of the California Code of Regulation (CCR) for exemption from the Professional Engineering Assessment [reference Title 22 CCR section 66265.192(j)]."

The Owner/Operator will need to provide either one of the following:

Attach proper documentation for the Local Fire Marshal installation, usage, and design approval for the tank, i.e. a Fire Marshal permit of installation, a Fire Marshal inspection report approving the installation, OR have the Fire Marshal sign, print name, and date the form.

The Owner/Operator of the facility will submit the form to the inspector by email, or mail it to the address on the top right corner on the form. For a complete list of inspectors go to <u>smchealth.org/cupainspectors</u>

Approval Section: The SMCEH Inspector will sign the approval, and a copy of the form will be sent to the facility. The original will be part of the facility's records.

Renewal: The AST certification & engineering assessment exemption is valid for three years from the CUPA's approval date. Owners/operator could apply for a subsequent exemption by submitting a new AST Certification & Engineering Assessment Exemption Notification Form. San Mateo County CUPA may decline the exemption if the facility is not in compliance with the required leak detection program, or if there is visible evidence of leaks at any time. In this case, the hazardous waste tank(s) must be assessed by a professional engineer in compliance with 22 CCR 66265.192.