TOWN OF ELLINGTON, CONNECTICUT DEPARTMENT OF TOWN FIRE MARSHAL

P.O. Box 187 06029 T: (860) 870-3126 F: (860) 870-3122



NOTICE OF INTENT to TEMPORARILY OF PERMANENTLY CLOSE IN PLACE OF REMOVE <u>ANY</u> UNDERGROUND FLAMMABLE OF COMBUSTIBLE LIQUIDS STORAGE TANK OF ALL PROPERTIES EXCEPT SINGLE OF TWO-FAMILY RESIDENTIAL PROPERTY

INSTRUCTIONS to the Property Owner:

Form:055 Rev: 2/1

The 2015 Connecticut Fire Prevention Code (the Code) requires that you, AS THE PROPERTY OWNER, notify this Department of your intent to temporarily or permanently close in place or remove any flammable or combustible liquid underground storage tank on any property OTHER THAN SINGLE OR TWO-FAMILY RESIDENTIAL PROPERTY. For such work within the Town of Ellington the filing of this form with this Department AT LEAST ONE WEEK PRIOR TO THE START OF SUCH WORK is required. It is also required that you provide a *minimum of 72 hours notice* prior to the actual removal of the tank from its grave by calling 860-870-3126 and leaving a message. Additionally, a Building Dept. permit for such work is required. A Fire Marshal inspection may be conducted during the course of the work, at our discretion. Specific approval by this Department is required before any tank may be abandoned in place. This form must be completed in its entirety and you must provide copies of all documentation related to this work, including photos that might be taken. Failing this shall cause you to be in violation of the Code.

IN THE EVENT OF AN ACCIDENT, FIRE, EXPLOSION AND/OR SPILL: you must notify the fire department immediately by calling 911. The fire department shall notify this department and an investigation shall be conducted. A result of that investigation may be that you are held legally responsible and charges may be filed at Superior Court at the discretion of the Fire Marshal. Do not notify the fire department if contamination is found at the excavation site. Do notify the Connecticut Department of Energy and Environmental Protection, Oil and Chemical Spill Section at 860-566-3338. DEEP shall instruct you as to how you must proceed in that event. DEEP shall notify this Department and an investigation may be conducted as referenced above. SEE STATE OF CONNECTICUT CONTRACTOR LICENSING REQUIREMENTS. BELOW.

conducted as referenced above. CLL	OTATE OF COMMED	1001 CONTINACTOR LICEN	OIITO ILLAOIILLIIILIII	O, DELOTT.
Property Address:		Legal Owner(s) of Property; Name(s	s):	
Occupancy Type:		Address:		
Size (Capacity) of Tank to be Temporarily Closed/Removed/Abandoned in Place:		Telephone(s): Home:	Work:	
Methodology: (Use the back side of this form if additional space is necessary.) FOR ALL METHODS, explain the metering system and method you will use to render the tank atmosphere safe for work and transport:				
COMPLETE REMOVAL: If Tank is to be removed, explain destination (exact physical location, i.e. company name and address) of tank following removal:				
□ ABANDONMENT IN PLACE; this requires specific Fire Marshal approval and the reason for this necessity and the method to be utilized must be explained:				
Following this removal/abandonment, will any underground flammable or combustible liquids storage tank(s) remain upon the premises? NO YES: Please Explain below:				
Exact Location of Tank to be Removed/Abandoned (include sketch on back, if appropriate). Be specific:				
STATE OF CONNECTICUT LICENSING REQUIREMENTS: Single and two-family residential buildings are not regulated by this department and are, therefore, exempt from the requirements contained herein. However, licensing requirements for work in those same buildings are regulated by the CT Dept. of Consumer Protection. At a minimum, use of registered Home Improvement Contractors at residential buildings with three or four dwelling units is required for the dismantling of the piping system. Use of licensed Heating and Plumbing Contractors is required at all other occupancies and are acceptable for all work at all occupancies, including the three and four-family occupancies in place of the Home Improvement Contractors. Contractor: Name				
Address:	Address:	Address:		
Phone:	icense No.:	Phone:		License No.:
Scope of Work to be Performed:		Scope of Work to	Scope of Work to be Performed:	
Contractor's Signature:	Date:	Contractor's Sign	iature:	Date:
OWNER(S) RESPONSIBILITIES:				
I understand that, <u>as the owner of this propert</u>	v I have a legal obligation to)·		
 ensure that this underground sto meet that obligation; and file this form at least one week in 	rage tank removal be done n advance of this work; failu	in strict accordance with the regulati are to provide 72 hours notice prior t	to actual removal of the tar	eticut; the hiring of a licensed contractor shall ask from its grave is a violation of the Code as
determined by the Fire Marshal. Printed Name:	determined by the Fire Marshal. The regulations are available at the Department of Town Fire Marshal. ted Name: Signature (Required):			Date: