



BUILDING DEPARTMENT
 1584 Hadley Avenue N
 Oakdale, MN 55128
 Phone: 651-739-5150
 Fax: 651-730-2820
 E-Mail: permits@ci.oakdale.mn.us
www.ci.oakdale.mn.us

FOR OFFICE USE ONLY		
PAYMENT RECEIVED IN FORM OF		
<input type="checkbox"/> CHECK (#)	<input type="checkbox"/> CASH	<input type="checkbox"/> CC (#)
		<input type="checkbox"/> Visa <input type="checkbox"/> MC <input type="checkbox"/> Disc.
PERMIT NUMBER:		

STORAGE TANK INSTALLATION/REMOVAL PERMIT APPLICATION

JOB INFORMATION	
Job Address:	
Check One: <input type="checkbox"/> Above Ground <input type="checkbox"/> In Ground	Check One: <input type="checkbox"/> Installation <input type="checkbox"/> Removal
Number of tanks to be installed/removed:	
Size (gallons) of tanks to be installed/removed:	
Type of fuel (<i>gasoline, fuel oil, drain oil, etc.</i>):	
For <u>removal</u> only: Is there any evidence of tank leakage? <input type="checkbox"/> Yes <input type="checkbox"/> No	

APPLICANT INFORMATION		
Applicant:		
Day Phone:	Cell Phone:	
Address:		
City:	State:	Zip:
Check One: <input type="checkbox"/> Property Owner <input type="checkbox"/> Contractor		

SIGNATURE	
Applicant Signature:	Date:

Applicant shall attach a site plan showing all property lines, buildings, parking areas, driveways and tank locations with this form and meet all requirements of the International Fire Code.

FOR CITY USE ONLY		
Permit Fee	\$80.00 x _____ tanks + \$18.00 fire surcharge =	\$

APPROVALS	
Building Official	Date
Fire Department	Date