

Above/Underground Storage Tank
Permit Application
Removal & Installation

Village of Downers Grove
Fire Department



Part 1: Property Information

Name of Property Owner (First & Last) _____

Property Address: _____

PIN # ___ - ___ - _____

Property Owner Phone Number: _____

Property Owner E-Mail: _____

Part 2: Tank / Location Attributes

Number of tanks being **removed**: _____ Number of tanks being **installed**: _____

Tank #1: Remove Install

Capacity in gallons: _____

Commodity: _____

Date of original install _____

Tank use (i.e. Fueling station, generator fuel, etc.) _____

Tank #2: Remove Install

Capacity in gallons: _____

Commodity: _____

Date of original install _____

Tank use (i.e. fueling station, generator fuel, etc.) _____

Tank #3: Remove Install

Capacity in gallons: _____

Commodity: _____

Date of original install _____

Tank use (i.e. fueling station, generator fuel, etc.) _____

Tank #4: Remove Install

Capacity in gallons: _____

Commodity: _____

Date of original install _____

Tank use (i.e. fueling station, generator fuel, etc.) _____

Part 3: Contractor Information

Contractor _____

Contractor Phone number: _____

If more than four tanks are being installed or removed, please provide that information on a separate sheet.