Instructions: This form must be completed and submitted to the North Dakota Department of Environmental Quality (DEQ) to verify that tank system components are compatible with fuel blends exceeding 10% ethanol or 20% biodiesel. A knowledgeable individual should complete the tank, piping, and dispenser information sections. Tanks with interior linings will not be approved for alternative fuel storage. Submit this form to the DEQ by mail or scan and send by email to ndust@nd.gov. If there is more than one tank or piping use another form.

Site information			Owner information								
ND UST Facility ID:			Name:								
Facility name:				Company Name							
Address: City:				Address:							
				City: Zip code:							
Contractor info	ormati	on		Tank info	rmat	ion					
Contractor name:			Size in gallons:								
Address:				Manufacturer:							
City:				Model/Brand:							
State:	tate: Zip code:				Tank material:						
Phone:				Tank single/double wall:							
				Installation date:							
Fuel Information	on			Diadias d nave							
Ethanol Percentage:				Biodiesel percentage:							
Identify the Manufactu Manufacturer approve	d for stor	ring alternative f	uel.		1		•				
Tank/Piping Sump	Mar	nufacturer	Mode	el/Brand	UL Approved? Yes No		UL number	Man. Approved? Yes No			
Spill bucket					100			100	110		
Overfill											
Drop tube											
Submersible pump/ Suction pump											
Leak detection probe											
Piping sump											
Dining cump concor									1		

Piping Manufacturer:			Model/Brand: Installation date:						
Piping single/double w									
	rer, Model/Brand, and whet d for storing alternative fue		of equipme	nt is Under	writers L	aboratories (UI	L) listed o	r	
Piping	Manufacturer	Mode	el/Brand	UL Appro Yes		UL number	Man. Approved? Yes No		
Pipe fittings/ Valve material				163	No		163		
Gaskets/Seals									
Pipe sealant/ Adhesive									
Flex connector									
ine leak detector									
Flow restrictor									
Dispenser									
	rer, Model/Brand, and whet d for storing alternative fue		of equipme	nt is Under	writers L	aboratories (UI	L) listed o	r	
Dispenser	Manufacturer	Mode	el/Brand	UL Approved?		UL number	Man. Approved?		
				Yes	No		Yes	No	
Dispenser piping									
Dispenser sump									
Dispenser sump sensor									
Gaskets/Seals									
Blending valve									
Check valve									
/leter									
Emergency/ Shear valve									
-uel filters									
Break-away									
Nozzle(s)/Swivel(s)									
Hose(s)									
Comments:									
Certification									
I hereby certify that I have type of equipment installe	personally examined the tan	k system comp	onents and/o	or reviewed ii	nstallation	documentation	, verifying i	the	
Owner or authorized representative:			Tank contractor:						
Name:	Name:								
Title:			Title:						
Date:	Date:								