

**MARYLAND DEPARTMENT OF THE ENVIRONMENT**

Land and Materials Administration • Oil Control Program

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**INDIVIDUAL OIL OPERATIONS PERMIT APPLICATION  
FORM A**

**Storage, Transfer and Delivery of Oil within the State of Maryland**

1. Type of oil operations (check all that apply)

\_\_\_\_\_ Transport and/or Delivery  
(tanker and/or truck tank)

\_\_\_\_\_ Marina

\_\_\_\_\_ Storage (aboveground)

\_\_\_\_\_ Transfer Operations

\_\_\_\_\_ Handling Used Oil      EPA Identification Number: \_\_\_\_\_

\_\_\_\_\_ Other (specify) \_\_\_\_\_

2. Nearest Body of Water

Name: \_\_\_\_\_ Tributary to: \_\_\_\_\_

Approximate distance from your facility: \_\_\_\_\_

3. Is your facility required to have a federal Facility Response Plan? No \_\_\_\_\_ Yes \_\_\_\_\_

4. Provide a to-scale diagram of the facility showing dimensions and locations of:

aboveground storage tanks and dikes  
oil/water separators  
storm drains  
outfalls

loading racks  
buildings  
overnight truck location  
property lines and adjacent owners

5. Method of transfer (check all that apply)

\_\_\_\_\_ vessel/ barge

\_\_\_\_\_ truck

\_\_\_\_\_ rail

\_\_\_\_\_ pipeline

\_\_\_\_\_ other (specify) \_\_\_\_\_

**INDIVIDUAL OIL OPERATIONS PERMIT APPLICATION  
FORM A (continued)**

**Table 1 - Aboveground Storage Tank Description\***

Enter details for each aboveground oil storage tank. Oil includes but is not limited to the following: asphalt, gasoline, ethanol that is intended to be used as a motor fuel or fuel source, kerosene, aviation/jet fuels, diesel fuel, biodiesel fuel regardless of whether the fuel is petroleum based, used oil, waste oil, lubricating oils, hydraulic oil, mineral oil, and all heating oils. Do not include tanks used for edible oils (unless included in the aforementioned list), propane, natural gas, or antifreeze.

Tank Number or ID#  **	Built Year  ***	Storage Capacity (Gallons)	Type of Oil Stored	Associated Piping		Secondary Containment (Examples- double-walled tank, steel, concrete, vault, none, earthen)
				Above ground	Underground (Example: S-Y-A-04/08 )  ****	

\* Attach additional sheet(s) if necessary or include a copy of your storage tank database.  
 \*\* List facility tank number if applicable.  
 \*\*\* Include "Unknown" if built year not known.  
 \*\*\*\* For underground piping, use the following coding, **one from each category**:

<u>TYPE</u>	<u>CP</u>	<u>TESTED</u>
S = Steel	Y = Yes	A = Yes + Date = MM/YY
F = Fiberglass	N = No	B = No
C = Copper	N/A = Not Applicable	X = N/A
SW = Single Wall		
DW = Double Wall		
O = Other		

**INDIVIDUAL OIL OPERATIONS PERMIT APPLICATION  
FORM A (continued)**

**Table 2 - Transportation Description\***

Enter details for each truck tank or transport owned by you and used for transferring oil in Maryland. You must also complete all questions on pages 4-5 before this application can be processed by the Department.

<b>Truck Number</b> (could be tank #, vehicle #, trailer #, etc.)	<b>Truck Type</b> Choices are: a. truck tank-less than 10 wheels b. transport- 10 wheels or greater (i. e. tractor trailer) c. vacuum tank-all sizes	<b>Tank Size</b> (gallons)	<b>Type of **</b> <b>Product</b> <b>Carried in</b> <b>Each Truck</b>
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
Copy this page for listing additional vehicles			

\* Attach additional sheet if necessary or provide a copy of your transport/truck tank database

\*\* Be specific such as: #2 heating oil, gasoline, diesel, kerosene, asphalt  
 Use "various" if tank compartments are not dedicated to carry a single product

**INDIVIDUAL OIL OPERATIONS PERMIT APPLICATION  
FORM A (continued)**

**Transportation Requirements**

If you have a transport or truck tank with a capacity greater than 500 gallons complete the following:

**Zoning**

1. No \_\_\_\_\_ Yes \_\_\_\_\_ Property where vehicles are parked overnight (domiciled) is properly zoned for the parking of commercial truck tanks/transport? If the truck is parked on other than commercial/ industrial zoned property a certificate of use, special exception, home occupation permit, or other documentation from county or local government shall be provided with this application.
2. No \_\_\_\_\_ Yes \_\_\_\_\_ Location of Facility identified by you on the General Application Form is the address where all truck tanks/transport for your company are domiciled? If trucks are domiciled at multiple locations, list all Maryland addresses separately and provide truck tank/transport identifier for each location.
3. No \_\_\_\_\_ Yes \_\_\_\_\_ Do you hire independent owner/operator(s) to transport oil for your company? If yes, list addresses (if different from above) where owner/operator truck tanks/transport are domiciled and provide documentation that these commercial vehicles are in approved zoning locations.
4. If question #3 was marked "Yes", provide the names and addresses of each owner/ operator along with their valid Individual Oil Operation Permit Number issued by the Department. All independent owner/operators must have a valid Oil Operations Permit to haul oil into or out of Maryland.
5. No \_\_\_ Yes \_\_\_ Truck tanks/transport are parked in accordance with 49 CFR 397.7 (b)?

*Web address <http://www.access.gpo.gov/cgi-bin/cfrassemble.cgi?title=200449> to view the referenced Code of Federal Regulations (CFR) citations.*

**Insurance coverage**

1. No \_\_\_\_\_ Yes \_\_\_\_\_ N/A \_\_\_\_\_ Meet minimum limits of insurance coverage in accordance with the Code of Federal Regulations 49 CFR 387.1-.17, .301-.323 and .401. Provide a copy of Form MCS90 or Form MCS82 with this application.
2. If N/A, meet minimum limits of insurance coverage in accordance with Transportation Article, Title 17, Annotated Code of Maryland? No \_\_\_\_\_ Yes \_\_\_\_\_

**Preventative Maintenance**

No \_\_\_\_\_ Yes \_\_\_\_\_ All truck tanks/transport have Preventative Maintenance (PM) performed annually or every 25 thousand miles in accordance with 49 CFR 396.1-.25; Transportation Article §23-302, Annotated Code of Maryland; and COMAR 11.14.01, .04., and .05 ?

*Web address <http://www.dsd.state.md.us/comar/> go to Search Option 3, click Title 11, Subtitle 14 to view the referenced Code of Maryland Regulations (COMAR).*

**INDIVIDUAL OIL OPERATIONS PERMIT APPLICATION**  
**FORM A (continued)**

**Tank Inspection and Testing**

No \_\_\_\_\_ Yes \_\_\_\_\_ N/A \_\_\_\_\_ (Required only for companies operating DOT specification truck tanks/transporters or vacuum trucks used for transporting flammable petroleum liquids) Tanks inspected and tested in accordance with 49 CFR 180.407 by the following methods and frequencies? a. visual/annual b. leakage/annual c. internal/5years d. pressure/5years

**Identification Number(s)**

1. No \_\_\_\_\_ Yes \_\_\_\_\_ N/A \_\_\_\_\_ U.S. DOT identification number(s) obtained for interstate truck tanks/transporters and vacuum trucks?
2. No \_\_\_\_\_ Yes \_\_\_\_\_ N/A \_\_\_\_\_ Maryland State Highway Administration (SHA) identification number(s) obtained for intrastate vehicles?

**Hazardous Material (HM) Registration and Training**

1. No \_\_\_\_\_ Yes \_\_\_\_\_ N/A \_\_\_\_\_ All placarded truck tanks/transporters registered in accordance with 49 CFR 107? (vehicles strictly hauling used oil are exempt)
2. No \_\_\_\_\_ Yes \_\_\_\_\_ N/A \_\_\_\_\_ Current with HM training requirements as specified in 49 CFR 172.700?
3. No \_\_\_\_\_ Yes \_\_\_\_\_ Current with annual driver safety training requirements as required by the Department and specified in COMAR 26.10.01.16D?

**INDIVIDUAL OIL OPERATIONS PERMIT APPLICATION**  
**FORM A (continued)**

Application is hereby made to the State of Maryland, Department of the Environment, Land and Materials Administration for an Individual Oil Operations Permit for the operations and activities described on the forms being submitted. I certify that I am familiar with the information contained in this application, and that this information is true, complete and accurate. I further certify that, in accordance with Environment Article § 4-405(b), Annotated Code of Maryland, I have requested and received confirmation from the county that the oil operations business at the location identified on the *Individual Oil Operations Permit Application General Form* meets all zoning and land use requirements for that county. I understand that the inclusion of any false or misleading information, or the exclusion of required information in this Application, may cause the Administration to issue an Administrative Complaint seeking civil penalties in accordance with Environment Article § 4-412 and § 4-417, Annotated Code of Maryland, and may include the suspension or revocation of any permit or license issued. I further understand that failure to notify the Administration of oil spills or leaks, regardless of size, is a violation of Sections 4-401 through 4-420 of the Environment Article, Annotated Code of Maryland, which may also subject me to an Administrative Complaint and civil penalties.

Company Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Authorized Applicant/Agent: \_\_\_\_\_

Printed name of Authorized Applicant/Agent: \_\_\_\_\_

Title of Authorized Applicant/Agent: \_\_\_\_\_

**Notice: Collection of Personal Records – State Government Article § 10-624**

This Notice is provided pursuant to § 10-624 of the State Government Article of the Maryland Code. The personal information requested on this form is intended to be used in processing your application. Failure to provide the information requested may result in your application not being processed. You have the right to inspect, amend, or correct this form. The Maryland Department of the Environment (“The Department”) is a public agency and subject to the Maryland Public Information Act. This form may be made available on the Internet via the Department’s website and is subject to inspection or copying, in whole or in part, by the public and other governmental agencies, if not protected by federal or State law.