



Department of Public Health
 Storage Tank Division
 333 South State Street, Room 200
 Chicago, Illinois 60604
 Web Site: www.cityofchicago.org

Facility # _____
Date _____

OWNER AND CONTRACTOR ATTESTATION AS TO TANK WALL INTEGRITY

_____, the owner/operator, and _____, contractor,
 [Name of individual owner/operator or officer] [Name of individual contractor or officer]

being first duly sworn under oath, represent and attest as follows (**CHECK EACH BOX BELOW**):

- The tanks herein sought to be lined under this permit application are being lined strictly for purposes of product compatibility.
- The tanks herein sought to be lined under this permit application have no history of structural defects or partial dissolution or degradation of the tank wall as shown by plugged filters, visual evidence of peeling or blistering, or other operational evidence of problems with the tank wall.
- The tanks herein sought to be lined under this permit application have been visually inspected by way of available access ports and the tank filters, and there has been observed no evidence of peeling, blistering, cracking, or other defects in the tank wall, or other structural defects or partial dissolution or degradation or of plugged filters or other evidence of problems with the tank wall.
- Neither myself or contractors or other personnel advising myself or my employees or agents of the conditions of these tanks upon inspection, nor prior owners, have at any time advised or notified myself or my employees or agents of evidence of peeling, blistering, cracking, or other defects in the tank wall, or other structural defects or partial dissolution or degradation of the tank wall shown by plugged filters, visual evidence of peeling or blistering, or other operational evidence of problems with the tank wall.
- Upon tank entry and interior inspection pursuant to the City of Chicago Department of Public Health (CDPH) permit to be granted under this permit application, I myself certify, for my company, employees and agents, that in the event there is any evidence of peeling, blistering, cracking, or other defects in the tank wall, or other structural defects or partial dissolution or degradation of the tank wall, that I will ensure that all persons conducting such work immediately cease such work and provide written notice to the CDPH that such tank or tanks will not be lined. I understand that a copy of such notice shall remain in the CDPH and the OSFM files and with the UST facility records for future reference.

NOTE: All contractors performing lining, tank entry work and tank and line testing must be licensed by the Office of the State Fire Marshal, Division of Petroleum and Chemical Safety. Work conducted by other than OSFM-licensed contractors is invalid.

This form must be kept with all required site records for future reference.

SIGNATURES UNDER OATH:

Under the penalties as provided by law pursuant to Section 1-109 of the Code of Civil Procedure, the undersigned certifies that the statements set forth in this instrument are true and correct, except as to matters stated to be on information and belief and as to such matters the undersigned certifies as aforesaid that he/she verily believes the same to be true.

FACILITY OWNER/OPERATOR:

 Signature

 Name (print or type)

 Title

 Address

 City, State, Zip Code

LINING CONTRACTOR:

 Signature

 Name (print or type)

 Title

 Address

 City, State, Zip Code

RETURN COMPLETED FORM TO:

City of Chicago department of Public Health, 333 South State Street, Room 200, Chicago, IL 60604