

625 ROBERT STREET NORTH, SAINT PAUL, MN 55155-2538 WWW.MDA.STATE.MN.US

Pesticide & Fertilizer Management Division Phone: 651-201-6057

Anhydrous Ammonia (NH3) Storage Permit Application New Installations or Change in Ownership

MDA Cashier Place New Permit Number Here:

Fertilizer License Number: _

Minn. Stat. Sec. 18C.305

It is a violation of MN Statutes 18B and 18C for a person to construct new safeguards or substantially alter an existing permitted bulk Ag Chemical storage facility. If discovered that a firm is in violation of these statutes they may receive ORDERS from the Minnesota Department of Agriculture (MDA) to Cease & Desist all construction activity until a permit has been granted by the MDA, stipulations met, inspection(s) performed and possible enforcement action.

- NEW FACILITY SITE Complete and submit both this page, application checklist, and specified information.
- CHANGE IN OWNERSHIP Only complete and submit this page (page 1).
- PERMIT CANNOT BE APPROVED UNTIL all specified application information is received and found completed and correct.

| your social security number (MS have access to your social securi | Sec 270C.72). We ty number except | are required by law to other those permitted access | ovide your Minnesota Tax ID num collect this information and we can by law, your written consent, coun o, contact the Minnesota Departm | nnot grant your license rt order, or those depa | e (permit) with it. No one will rtment employees whose | |
|--|-----------------------------------|---|--|--|---|--|
| BUSINESS INFORMATION | | | | | | |
| Legal Name | | | MN Tax ID or if none, Social Security Number | | | |
| DBA (if different) | | | Mailing Address (if different) | | | |
| Physical (911) Address of Prop | oosed Permit Site | (No PO Box) | City State | | e Zip Code | |
| City | State | Zip Code | Company Telephone | | | |
| County | | | Contact Person | | | |
| CHANGE IN OWNERSHIF List former entity/entitles and | | AND LOC | CATIONS INVOLVED IN CHA | ANGE OF OWNERS | SHIP | |
| LEGAL DESCRIPTION | | | | | | |
| Township Name | Towr | ship Designation | Range Designation | Section | 1/4 of 1/4 Section | |
| LOCAL PERMIT / CONST | RUCTION / CO | NTRACTOR INFORI | MATION – FOR NEW FACIL | ITY PERMIT APPL | ICATION ONLY | |
| Is a local permit required? YES NO If yes, submit a copy of the local permit approval document. | | | Has construction already begun? | | | |
| Contractor | | | Telephone | Email | | |
| Welding Contractor (if different than contractor) | | | Telephone | Email | | |
| PERMIT FEES | | | | | | |
| New Facility/Change in Owne | ership Permit App | lication Fee. | | \$ 100.00 | 600290(3100) | |
| Penalty for constructing or substantially altering an anhydrous ammon | | | onia facility without a permit. | \$ 250.00 | 600290(3510) | |
| | | | Total Due | \$ | | |
| RETURN THIS FORM WIT | H YOUR CHEC | K MADE PAYABLE T | O FOR OFFICE USE ONLY | 1 | | |
| Minnesota Department of Agriculture Attn: Cashier 625 Robert Street North Saint Paul, MN 55155-2538 | | | Date Application Fee Payment Received | | | |
| Fees are not transferrable | or refundable. | | | | | |

ANHYDROUS AMMONIA STORAGE PERMIT APPLICATION

It is a violation of MN Statute 18C for a person to install new safeguards or substantially alter an existing permitted safeguard at an anhydrous ammonia storage facility without permit approval. If permit approval is not obtained the Minnesota Department of Agriculture (MDA) may issue ORDERS to Cease & Desist construction activity and/or operation until permit approval has been granted, stipulations met, inspection(s) performed and possible enforcement action. Permit approval will not be issued unless sufficient information is provided by the applicant and approved by the MDA.

| SUBMIT THE II | NFORMATION I | NOTED IN 1-9. Use the Permit App | lication Worksheet to assist in compiling t | he information. | | | | |
|---|---|----------------------------------|---|-------------------|--|--|--|--|
| ✓ ADDRESSED | ADDRESSED = Check EACH line item (i.e. 1-10) when both applicant and contactor(s) have addressed/compiled each line item in this permit application. State "N/A" for item(s) that are not applicable to the permit application. | | | | | | | |
| | Storage tank information. | | | | | | | |
| | 2. Local written permit | | | | | | | |
| | 3. Facility identification sign | | | | | | | |
| | 4. Fertilizer license | | | | | | | |
| | 5. Aerial image showing storage tank location, setback distances and location of other structures, etc.6. Detailed drawings/diagrams illustrating details of: | | | | | | | |
| | Detailed drawings/diagrams illustrating details of: A. Painting, Marking, and Placarding Requirements | | | | | | | |
| | B. Liquid and Vapor Phase identification of NH3 Storage Tank and Transfer Area Openings | | | | | | | |
| | C. Footings, piers, and saddle supports for each added or relocated storage tank | | | | | | | |
| | D. Components installed in openings of each added or relocated storage tank | | | | | | | |
| | E. Facility piping components | | | | | | | |
| | F. Transfer System Components | | | | | | | |
| | G. Cargo Tank (i.e. transport) transfer area | | | | | | | |
| | H. Rail transfer area | | | | | | | |
| | | tank riser transfer area | | | | | | |
| | J. Traffic protection K. Fencing securing facility – If fencing is used for facility security rather than locking out main shut-off valves on storage tanks and nurse tank riser transfer area hose-end valves | | | | | | | |
| | | training records | note: area nose ena varves | | | | | |
| | | equipment for storage facility | | | | | | |
| | A. Each storage facility installation | | | | | | | |
| | B. Cargo Tank (i.e. transport) transporting anhydrous ammonia | | | | | | | |
| | | sponse Plan | | | | | | |
| | 10. Welding & | Welder Qualification Documents: | WPS-QW482, PQR-QW483, and WPQ-QW | 484 | | | | |
| | | CERTIFICATIONS OF ACCURATE | COMPLETE ANHYDROUS AMMONIA P | ERMIT APPLICATION | | | | |
| FACILITY CERT | | | | | | | | |
| I hereby certify t | hat all items in t | he anhydrous ammonia permit app | lication is complete, true and correct. | | | | | |
| Name (please prin | nt): | | Signature | Date | | | | |
| Title: | | | | | | | | |
| Office #: | | Cell #: | Email Address: | | | | | |
| MAIN CONTRACTOR CERTIFICATION | | | | | | | | |
| I hereby certify that all items in the anhydrous ammonia permit application is complete, true and correct. | | | | | | | | |
| Name (please print): | | | Signature | Date | | | | |
| Title: | | | | | | | | |
| Office #: | | Cell #: | Email Address: | | | | | |
| WELDING CONTRACTOR CERTIFICATION | | | | | | | | |
| Is the welding contractor the same firm/person as the main contractor? YES NO If no, welding contractor to complete area below. | | | | | | | | |
| I hereby certify that all items in the anhydrous ammonia permit application is complete, true and correct. | | | | | | | | |
| Name (please print): | | | Signature | Date | | | | |
| Title: | | | | | | | | |

Email Address:

Cell #:

Office #: