

625 Robert Street North Saint Paul, MN 55155-2538 www.mda.state.mn.us **Requires New Permit #**

Pesticide & Fertilizer Management Division Ph. 651-201-6615 Fax 651-201-6274

Minn. Stat. Sec.18C.305

Bulk Pesticide/Fertilizer Storage — New Storage Application

New Facility Site

Change in Ownership

The data on this form will be used to process your application. You must provide your Minnesota Tax ID number. If you do not have one, you must provide your social security number (MS Sec 270C.72). We are required by law to collect this information and we cannot grant your license without it. No one will have access to your social security number except those permitted access by law, your written consent, court order, or those department employees whose job duties require access. Pursuant to MS Sec 297A.66 if your company maintains within the state an office or place of distribution or sales person or other employee that solicits, sells or delivers goods or services in the state you must have a Minnesota Tax ID number. If you are unsure if you need a Minnesota Tax ID, contact the Minnesota Department of Revenue at www.taxes.state.mn.us.

Does your company maintain within the state an office or place of distribution or sales person or other employee that solicits, sells or delivers goods or services in the state? YES or NO. If yes, enter the MN Tax ID number in the space provided below.

COMPANY INFORMATION (Please print	.)					
Company Legal Name:	/		MN Tax ID or if none,	Social Security #		
DBA (If different):						
Physical (911) Address of Proposed Permit S	ito (No DO Poy	Λ.	Company Maining Aut	Company Mailing Address (If different):		
Physical (911) Address of Proposed Permit S	ite (NO PO BOX	.)	6 :			7.
		T	City:		State:	Zip:
City:	State:	Zip:	Company Telephone	#:		
County:			Contact Person:			
CHANGE IN OWNERSHIP APPLICATION	NS ONLY —	List former lego	al company name(s) and ad	ldress(es) involve	d in Change of Ov	vnership.
Former Company Legal Name(s):						
Township Name:			Township Designation	n:		
Range Designation:	Secti	on:	1/4	4 of 1/4 Section		
PERMIT FEES						
New or existing site locations that do no						
New bulk pesticide facility (liquid and					600326(3100)	\$ 100.00
New bulk fertilizer facility (liquid and					600290(3100)	
New bulk combined pesticide/fertilizer Please provide brief description of propo				ipplication ree.	600326(3100)	
Penalty Fee (if applicable)						\$ 250.00
Constructing a new bulk pesticide fa					600326(3510)	-
Constructing a new bulk fertilizer fac					600290(3510)	
Constructing a new bulk combination	n pesticide/fe	rtilizer facility	without a permit.		600326(3510)	¢ = 00
MDA Processing Surcharge					553068(3360)	\$ 5.00 \$ 105.00
					TOTAL DUE	
					TOTAL DOL	\$ 355.00
	Return t	his form with	your check made payab	ole to:		7 000.00
Return this form with your check made payable to: Minnesota Department of Agriculture Attn: Cashier 625 Robert Street North Saint Paul, MN 55155-2538 Licenses are not transferable and fees are not refundable.						
I hereby certify that the information (contained in	and submitte	ed with this form is true	and correct.	FOR OFFIC	E USE ONLY
Signature:			Date:			
Name (Please Print)			Phone #:			
Title:			Fax #:			
Email Address:						

Submit the Following Information With This New Permit Application

A permit cannot be issued without this information.

It is a violation of MN Statutes 18B and 18C for a person to construct new safeguards or substantially alter an existing permitted safeguard at a 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 along with possible enforcement action.

1. Provide facility EPA Establishment Number if permit application invol	ves construction of a new Bulk Pesti	cide Facility.					
EPA Establishment Number:	Check if permit application is for Bulk Fertilizer Only						
2. Name of contractor(s) or company involved in constructing or installing this safeguard.							
Contractor Name:		Phone:					
Address:	City:	State:	7in·				

3. Provide a copy of a local permit letter of authorization required by any local unit of government (city, county, etc) for new construction being proposed.

Check if building permit is not currently available, but will be submitted prior to construction.

Check if no local building permit or authorization is required for this proposed construction.

4. Quarter Mile Map.

Attach a copy of a detailed map or a combination of maps, aerial photos, and diagrams which accurately label and show the location of the new proposed facility and include the following landmarks within 1/4 mile of the proposed construction (all directions):

- A. Distance and direction of residences, businesses, schools, nursing homes, hospitals, within 1/4 of the proposed new facility. Also note cropland, forest land and other land uses.
- B. Distance and direction to surface water (creeks, streams, rivers, lakes, ponds, wetlands, etc.), drainage ditches and down gradient storm sewers within 1/4 mile of the proposed new facility.
- C. Is there a municipal well within 1/4 mile of the facility?* YES NO
 *If yes, indicate well site on quarter mile map and note the distance from the proposed construction on map and here:

5. Facility Map/Diagram

Map/diagram of your facility property that clearly outlines your property and shows the location of the new proposed facility/safeguard. (This map is separate from the quarter mile and should include all the following information)

* Maps should indicate North, South, East and West directions and should also be close to scale.

- A. Indicate clearly on the facility map the correct property boundaries.
- B. Label and show all buildings and vehicle parking areas on the facility property.
- C. Indicate and label all current pesticide/fertilizer storage areas. Also label all areas where mixing and loading have occurred.
- D. Indicate where all storm sewer inlets and tile inlets and outlets are located on the property.
- E. Show location of all wells located on the property and indicate distance from the proposed new safeguard. Are there any wells within 150 feet of the proposed safeguard (dike, dry storage bins, load pad areas)?

 YES

 NO

6. Provide construction drawings/plans (to scale) for each of the proposed safeguards.

Plans must include material and design specifications for each area. Plans must also include dimensions and cross-section details that specifically show how the safeguard will be constructed and made water tight. Drawings must include details that show how all floor, wall/floor and wall joints will be constructed. (Indicate all specific waterstops and sealants that will be used). Do not submit an application without detailed construction plans that show how the safeguard will be built.

- · Do not submit an application without detailed construction plans that show how the safeguard will be built.
- Do not begin construction on the safeguard until a permit has been granted by the MDA.

7. Provide construction drawings/plans (to scale) for each of the proposed safeguards.

(See page #3) – Completely fill out all required information for tank(s)/bin(s) being added. Tank information is located on the top of the page while bin information is located on the bottom. You may use more than one page if necessary.

8. Provide calculations for all proposed secondary containment safeguards being proposed.

(See pages #4 and #5) — Calculations will determine/compare required and provided capacity of proposed secondary containment systems for bulk liquid storage. These pages are not required to be filled out for dry bulk storage of pesticide or fertilizer.

9. If permit application includes adding or changing tanks provide an overhead plumbing diagram which specifies locations, composition, diameter, and types of plumbing. Diagram should include: All tanks, valves, piping/hoses, pumps, meters, and scales.

Are all wetted parts from the tank outlet to and including the first valve (including bung, nipples, and all plugs) stainless steel? (This is a requirement for all pesticide tanks and is strongly recommended for all fertilizer tanks.)

YES

NO

10. Provide soils information at the surface to 3 foot level for proposed containment area site.

- A. For most proposed construction sites a copy of the soil series that represent the building site would be sufficient. This information can be obtained from your County Soil Survey. Provide a copy of the soil profile description that represents the proposed building location. This profile should include a soil description at depths to 60 inches. In some cases there may be more than one soil type that may need to be submitted.
- B. Approximate depth to high water table if less than 12 feet: feet
 - Soil Survey information can be obtained from the local Soil and Water Conservation District
 - NOTE: For larger construction projects, such as dry bulk fertilizer bins and field erected bulk ag chemical tanks, MDA may require a complete geotechnical site investigation prior to permitting.
 - Also, be aware that when constructing on sites that were previously used for ag chemical storing, mixing/loading, or used as parking
 areas it is strongly recommended (and may be required) to conduct preconstruction soil sampling of the area prior to construction. If
 your site may fit this description it is best to call the Incident Response Unit @ (651) 201-6268 to discuss your specific situation.
- 11. A release response plan is required under Minnesota Rules Part 1505.3100. This plan does not have to be submitted to the Minnesota Department of Agriculture with the permit application, but applicant must have one and it must be maintained and updated. (See MDA's website for suggested format for an Incident Response Plan.)

Is your firm's release response plan in place and up-to-date?

ES NO

The minimum required information in a release response plan is as follows:

- A. The identity and telephone numbers of the persons who are to be contacted in the event of an agricultural chemical release, including owners (responsible persons), managers, employees, and government agencies.
- B. A complete copy of each bulk pesticide label.
- C. A complete copy of the Material Safety Data Sheet (MSDS) for each bulk pesticide stored at the facility.
- D. The procedures and equipment to be used in abating and recovering a pesticide release.
- E. The general location where any bulk pesticide container is stored at the facility.

12. Markings/Signage Requirements

Facilities that store bulk liquid/dry fertilizer are required under Minnesota Rules Part 1510.0377 and Part 1510.0405:

- A. To have containers properly labeled with appropriate grade or guaranteed analysis of the contents of the storage container.
- B. An identification sign displayed in a clearly legible and conspicuous manner stating the name, address, and telephone number of the nearest agent, representative, owner, or person who operates the facility.
- C. An incident notification sign must be posted in a conspicuous place within the facility.

Does this application include storage of bulk liquid or dry fertilizer?

YES

If YES, will your company have all the required signage requirements in place prior to storing bulk fertilizer?

YES

NO

13. Markings/Signage Requirements

Will there be pesticide impregnation done in the new facility?

'ES NO

If Yes, will firm have adequate secondary containment for minibulk tanks and inductor?

NO

YES

Provide explanation of how minibulk tank(s) and inductor will be safeguarded:

Check: If firm does not plan to do any pesticide impregnation at this location.

Check: If firm plans to impregnate fertilizer but will only use small package pesticide containers (less than 56 gallons in size).

Explain all other scenarios:

Dike No. ¹	Type of Dike ²	Dike Material ³	Roofed/ Unroofed	Tank No.	Tank Capacity	Unit of Measurement ⁴	Tank Dimensions ⁵	Tank is Made of ⁶	Vert./ Horiz.	Cone/Flat Bottom	Ht. Floor to Cone	External Sight Gauge ⁷	Product Stored ⁸	Tank Age (Years)	Previous Product Stored
¹Dike r	number must corre	espond to facility m	ар.					⁵ List in feet (i.e. 6'4" = 6.33 feet). List diameter, height, and length. Height of tank = height from floor to top of tank, not from bottom of cone to top of tank (not from bottom of cone to top of tank).							
² Pestic	ide Dike, Fertilizer	Dike, Combination	Pesticide/Fe	rtilizer [ike, Combir	nation Dike/Load A	rea.	⁶ Mild Steel, Stainless Steel, Poly.							
³ Concr	ete, Metal, Poly, S	ynthetic, Masonry.						⁷ YES or NO.							
⁴ Gallor	ns							⁸ Product Name	e (i.e. Har	ness, Roundur	o, Dual, 28-0-0), Water, Rinsa	te, Surfactant, Fu	el).	

Dike No.	Type of Tank/Bin ¹	Roofed/ Unroofed	Tank/Bin No.	Unit of Measurement ² (Quantity in Tons)	Tank/Bin Dimensions ³	Tank/Bin is Made of ⁵	Vert/Horiz. ⁴	Product Stored	
¹ Dry B	¹ Dry Bulk Pesticide Tank, Dry Bulk Fertilizer Bin, Dry Bulk Fertilizer.					⁴ Vertical = tank storage, Horizontal = bin storage.			
² Tons	² Tons					⁵ Mild Steel, Concrete, Concrete/Wood.			
³ List ir	n feet (i.e. 6'4" = 6.33 fee	t). List Diameter/width, he	ight, and length.						

Note: For substantial alteration permit applications, include new tank/bin information and all other remaining tanks/bins within the containment area.

Secondary Containment Calculations

Return all of this information, if applicable, with the permit application.

IVE	turn an or this information, if	applicable, with the	permit application.		
* U	se tank information from Section	7 (Attachment 1).	** Convert all dimensions to fe	eet (i.e. 6'4" = 6.33').	*** All capacities are in gallons.
Ca	Iculations for Containm	ent Required			
1.	Dike Number	(Use a separate calc	ulation sheet for each dike.)		
2.	Multiply the capacity (gallo (unroofed) or 1.1 (roofed).	ns) of the largest tan	k (pesticide, fertilizer, water, rinsc	ate, etc.) in the seconda	ry containment area by 1.25
	Largest tank capacity (Tank	#):	gallons x	[1.25 <i>(unroofed)</i> o	r 1.1 (roofed)] =
3.	Vertical tank displacement	(gallons). NOTE: Con	e bottom tanks whose outlet is al	bove the height of a dik	e wall do not need to be calculated.
	Tank 2 diam	ft .x Tank 2 diam	ft .x .785 x dike wall l	nt ft .x 7.4	18 =
			Total gallon:	s displacement for Tank	2 =
	Tank 3 diam	ft .x Tank 3 diam	ft .x .785 x dike wall l	nt ft .x 7.4	18 =
			Total gallon:	s displacement for Tank	3 =
	Tank 4 diam	ft .x Tank 4 diam	ft .x .785 x dike wall l	nt ft .x 7.4	18 =
			Total gallon:	s displacement for Tank	4 =
	Tank 5 diam	ft .x Tank 5 diam	ft .x .785 x dike wall l	nt ft .x 7.4	18 =
			Total gallon:	s displacement for Tank	5 =
	Tank 6 diam	ft .x Tank 6 diam	ft .x .785 x dike wall l	nt ft .x 7.4	18 =
			Total gallon:	s displacement for Tank	6 =
	Tank 7 diam	ft .x Tank 7 diam	ft .x .785 x dike wall l	nt ft .x 7.4	18 =
			Total gallon:	s displacement for Tank	7 =
	Tank 8 diam	ft .x Tank 8 diam	ft .x .785 x dike wall l	nt ft .x 7.4	18 =
			Total gallon:	s displacement for Tank	8 =
		Add total gallons	of vertical tank displacement (Tar	nks 2-8) = (Vert. Tank Dis	spl.)
4.	Horizontal tank (round) disp	placement (gallons).			

	Add total gallo	ons of vertical tank	displacement (Tanks 2-8	8) = (Vert. Tank Displ.)	
4.	Horizontal tank (round) displacement (gallor	ns).			
	Tank 2 Dike Wall Ht. (ft.) / Tank	Diam. (ft.) =	=	_ conversion factor
	(from the chart below) Tank 2 capacity (gallo	ons)	X	_ conversion factor =	
	Tank 2 Displacement (gallons)				
	Tank 3 Dike Wall Ht. (ft.) / Tank	Diam. (ft.) =	=	conversion factor
	(from the chart below) Tank 3 capacity (gallo	ins)	x	_ conversion factor =	
	Tank 3 Displacement (gallons)				
	Add total gallons of horizontal (round) tank of	displacement (Tank	s 2-3) = (Horiz. Tank Dis	pl.)	_

Conversion Fa	ctors						
Dike Wall Ht. (ft.) +Tank Diameter (ft.)	Conversion Factor	Dike Wall Ht. (ft) + Tank Diameter (ft.)	Conversion Factor	Dike Wall Ht. (ft) + Tank Diameter (ft.)	Conversion Factor	Dike Wall Ht. (ft) + Tank Diameter (ft.)	Conversion Factor
.01	.0017	.26	.2066	.51	.5127	.76	.8155
.02	.0048	.27	.2178	.52	.5255	.77	.8262
.03	.0087	.28	.2292	.53	.5382	.78	.8369
.04	.0134	.29	.2407	.54	.5509	.79	.8473
.05	.0187	.30	.2523	.55	.5636	.80	.8576
.06	.0245	.31	.2640	.56	.5762	.81	.8677
.07	.0308	.32	.2759	.57	.5888	.82	.8776
.08	.0375	.33	.2878	.58	.6014	.83	.8873
.09	.0446	.34	.2998	.59	.6265	.84	.8967
.10	.0520	.35	.3119	.60	.6389	.85	.9059
.11	.0598	.36	.3241	.61	.6513	.86	.9149
.12	.0680	.37	.3364	.62	.6636	.87	.9236
.13	.0754	.38	.3487	.63	.6759	.88	.9320
.14	.0851	.39	.3611	.64	.6881	.89	.9402
.15	.0941	.40	.3735	.65	.7002	.90	.9480
.16	.1033	.41	.3860	.66	.7122	.91	.9554
.17	.1127	.42	.3986	.67	.7241	.92	.9625
.18	.1224	.43	.4112	.68	.7360	.93	.9692
.19	.1323	.44	.4238	.69	.7477	.94	.9755
.20	.1424	.45	. 4364	.70	.7593	.95	.9813
.21	.1527	.46	.4491	.71	.7708	.96	.9866
.22	.1631	.47	.4618	.72	.7822	.97	.9913
.23	.1733	.48	.4745	.73	.7934	.98	.9952
.24	.1845	.49	.4873	.74	8450	.99	.9983
.25	.1855	.50	.5000	.75		1.00	1.0000

5.	Enter the totals from sections 2,	.3, and 4 below. Add totals toge	ether and enter that total in the total	Containment Required space provided:
	2. Largest tank capacity x 1.25 o	r 1.1		
	3. Total vertical tank displaceme	nt		
	4. Total horizontal (round) tank (displacement		
	5. Other displacement (overbure	den, etc.)		
	6. Add 1,000 gallons for combine	ation dike/load pad		
	TOTAL CONTAINMENT REQUIRE	:D		
6.	Calculate the amount of contain	iment <i>(gallons)</i> for the seconda	ary containment:	
	Interior length	ft. x Interior width	ft. x wall height	ft. x 7.48
	TOTAL CONTAINMENT PROVIDE	:D		
7.	If the Total Containment Provide secondary containment area is a			quired figure from section 5 above, your
	If the Total Containment Pr	ovided figure in section 6 abov	ve is less than the Total Containment F	equired figure from section 5, you must:
	A. Increase wall heigh	nt or increase interior dimensio	ns and	
	B. Recalculate section	ı 6 above, which must equal or	exceed the Total Containment Requir	ed from section 5.
Sec	condary Containment Calcu	lations		
Ret	urn all this information with the	permit application if a new loa	ad pad is being proposed and is sepa	rate from containment dike above.
8.	Load Area #	(Use a separate sheet	for each load area.)	
9.	A. Length	ft. x width	ft. x average dept	6. 7.40
				ft. x 7.48
	(Loading areas must be curbed	3" in height at the perimeter.)		ft. x 7.48
		• •		
		ft. x width	ft. x average dept	
	B. Length	ft. x width nd B above. Enter total loading	ft. x average dept	
	B. Length C. Add the end figure from A an D. Bulk pesticide liquid load pace	ft. x width nd B above. Enter total loading	ft. x average deptarea containment gallons here:	
	B. Length	ft. x width d B above. Enter total loading d containment requirements:	ft. x average deptarea containment gallons here:	
	B. Length C. Add the end figure from A and D. Bulk pesticide liquid load pace 1. Containers of 500 U.S. g 2. Containers of 250 - 500	ft. x width Ind B above. Enter total loading Ind containment requirements: Indicate the containment and the containment requirements allons or more = Minimum cap	ft. x average deptarea containment gallons here: eacity of 1000 gallons. ty of 500 gallons.	
	B. Length C. Add the end figure from A and D. Bulk pesticide liquid load pace 1. Containers of 500 U.S. g 2. Containers of 250 - 500	ft. x width Ind B above. Enter total loading Ind containment requirements: Indicate the containment requirements: Indicate	ft. x average deptarea containment gallons here: eacity of 1000 gallons. ty of 500 gallons.	
	 B. Length C. Add the end figure from A and D. Bulk pesticide liquid load pactors of 500 U.S. g 2. Containers of 250 - 500 3. Containers of less than 2 	ft. x width Ind B above. Enter total loading Ind containment requirements: Ind containment	ft. x average deptarea containment gallons here: pacity of 1000 gallons. ty of 500 gallons. pacity of 250 gallons.	
	B. Length C. Add the end figure from A and D. Bulk pesticide liquid load pact 1. Containers of 500 U.S. g 2. Containers of 250 - 500 3. Containers of less than 2 Enter the appropriate minimals.	ft. x width Ind B above. Enter total loading Id containment requirements: I callons or more = Minimum cap U.S. gallons = Minimum capaci 250 U.S. gallons = Minimum cap mum capacity figure here: Ire listed in D with the figure in	ft. x average deptarea containment gallons here: pacity of 1000 gallons. ty of 500 gallons. pacity of 250 gallons.	
	B. Length C. Add the end figure from A and D. Bulk pesticide liquid load pace 1. Containers of 500 U.S. g 2. Containers of 250 - 500 3. Containers of less than 2 Enter the appropriate minimals.	ft. x width Ind B above. Enter total loading Ind containment requirements: It callons or more = Minimum capaci It callons = Minimum capaci It	ft. x average deptarea containment gallons here: pacity of 1000 gallons. ty of 500 gallons. pacity of 250 gallons.	