

• **Applicants should ensure that they:**

- are familiar with the *Storage Tank Regulations* under Yukon's *Environment Act*;
  - complete all applicable sections of this form, legibly printing or typing all information;
  - complete the signature block at the end of the form; and
  - submit all required attachments.
- A pre-permit inspection may be conducted prior to the issuance of any permit.
  - An assessment of the activity you are undertaking may be required under the Yukon *Environmental and Socio-Economic Assessment Act (YESAA)*.
  - Additional information may be required upon receipt of this application.
  - Payment of a technical review fee may be required prior to the issuance of this permit.

**Permits under the *Storage Tank Regulations* are not required for:**

- Tank systems that are used to store crude oil;
- Tank systems used for aboveground storage of hazardous substances with a capacity of less than 2,000 litres;
- Tanks used for aboveground storage of petroleum products with a capacity of 4,000 litres or less; or
- Tank systems with a capacity of 4,000L or less that are used to supply comfort heating systems (heat to buildings); **however** permits for the installation of these tanks are required under the National Building Code. Contact Building Safety for more information at 867-667-5741 or 1-800-661-0408 Ext. 5741.

**Submit your application**

- **By mail:**  
Government of Yukon  
Building Safety and Standards (C-8)  
Box 2703  
Whitehorse, Yukon Y1A 2C6
- **In person:** We are located at 2251B 2nd Avenue, Whitehorse.

**For additional information**

- **Phone:** (867)667-5741 or 1-800-661-0408 Ext. 5741
- **Fax:** (867) 393-6249
- **Visit our website:** <https://yukon.ca/en/doing-business/licensing/get-storage-tank-permit>



STORAGE TANK REGULATIONS  
**APPLICATION FOR A STORAGE TANK SYSTEM PERMIT**

Read carefully and fill out all sections. Attach additional pages as required.

**Part 1.0 — Contact and site information**

**A. Applicant information**

The applicant is the person or business in whose name the permit will be issued.

Business name or government agency / branch / department

Contact last name	Contact first name	Contact position title
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Email	Phone	Fax
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Mailing address

UNIT # (OPTIONAL)	STREET NUMBER AND NAME, OR P.O. BOX NUMBER	CITY OR TOWN	PROVINCE OR TERRITORY	POSTAL CODE
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**B. Description of business**

<input type="checkbox"/> Service station	<input type="checkbox"/> Mining	<input type="checkbox"/> Commercial
<input type="checkbox"/> Bulk plant	<input type="checkbox"/> Institutional	<input type="checkbox"/> Residential
<input type="checkbox"/> Mineral exploration	<input type="checkbox"/> Industrial	<input type="checkbox"/> Other, specify: _____

**C. Who is directly responsible for the management of the storage tank system?**

(For multiple contacts, list on a separate sheet.)

☐ Same as A. Applicant information. Skip to D. Where is the site located?

☐ Other. Fill out below.

Business name or government agency / branch / department

Contact last name	Contact first name	Contact position title
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Email	Phone	Fax
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Mailing address

UNIT # (OPTIONAL)	STREET NUMBER AND NAME, OR P.O. BOX NUMBER	CITY OR TOWN	PROVINCE OR TERRITORY	POSTAL CODE
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**D. Where is the site located? (For multiple site locations, list on a separate sheet.)**

Civic address

UNIT # (OPTIONAL)	STREET NUMBER AND NAME	CITY OR TOWN	PROVINCE OR TERRITORY	POSTAL CODE
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Legal address

UNIT # (OPTIONAL)	LOT #, BLOCK, PLAN #, QUAD/GROUP	STREET NUMBER AND NAME	CITY OR TOWN
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PROVINCE OR TERRITORY	POSTAL CODE
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Geographic coordinates

**E. Who owns the land on which the storage tank system is located?**

(For multiple site locations, list on a separate sheet.)

- ☐ Same as A. Applicant information. Skip to F. If the land is leased, by whom is it leased?
- ☐ Other. Fill out below.

Last name

First name

Phone

Email

**F. If the land is leased, by whom is it leased? (For multiple site locations, list on a separate sheet.)**

- ☐ Same as A. Applicant information. Skip to G. If the land is within municipal boundaries, what is the zoning of that land?
- ☐ Other. Fill out below.

Last name

First name

Phone

Email

**G. If the land is within municipal boundaries, what is the zoning of that land?**

(For multiple site locations, list on a separate sheet.)

**Note:** Applicants must comply with municipal bylaws and ensure they are aware of any restrictions on activities in zoned areas.**H. Which of the following activities are to be undertaken by the applicant at the site location?**

- ☐ Construction (installation) of a new storage tank system (fill out Parts 2.0 and 2.1)
- ☐ Alteration of an existing storage tank system (fill out Parts 2.0 and 2.1)
- ☐ Operation of a storage tank system (fill out Parts 2.0 and 2.1)
- ☐ Replacement of a storage tank system (fill out Parts 2.0, 2.1 and 2.2)
- ☐ Abandonment of a storage tank system (fill out Part 2.0 and 2.2)
- ☐ Removal of a storage tank system (fill out Parts 2.0 and 2.2)
- ☐ Closure of a storage tank system (fill out Parts 2.0 and 2.2)

**I. Is your project subject to review under the *Yukon Environmental and Socio-economic Assessment Act (YESAA)*?**

- ☐ Yes. YESAA project number or date application will be submitted: \_\_\_\_\_
- ☐ No

**J. What is your proposed start date?****Note:** Work cannot commence until the permit has been issued.**Part 2.0 — Construction, installation, or alteration of storage tank systems**

As per the *Storage Tank Regulations* reference code Environmental Code of Practice for Aboveground and Underground Storage Tank Systems Containing Petroleum and Allied Petroleum Products (PN 1326) please attach the following documents to your application:

- ☐ A detailed scope of work,
- ☐ Storage tank specification sheets,
- ☐ Site maps with clearances,
- ☐ Engineered drawings (Engineered drawings that bear the stamp and seal of a licensed engineering professional registered to practice in the Yukon),
- ☐ Fuel Spill Contingency Plan,
- ☐ Closure and Reclamation Plan,
- ☐ Any other applicable documents.

**Part 2.1 — Construction, installation, alteration or operation of storage**

A. Provide the following details for each aboveground (AST) and underground (UST) storage tank that you propose to operate. (Attach separate sheets if necessary.)			
Tank #	1	2	3
Type (AST/UST)			
Activity (Construction, installation, alteration and/or operation.)			
Tank manufacturer			
Date of manufacture			
Tank serial/model number			
Tank approval number			
Tank capacity (in litres)			
Tank contents (If petroleum, what type? If hazardous substance provide name, provide classification and PIN number.)			
Distance to groundwater table (Specify feet or metres)			
Distance to nearest surface water (specify feet or metres)			
B. What is the total number of storage tanks on-site (including the tanks identified above and any non-regulated tanks)?			

**C. Who is the business or person who will construct, alter or install the storage tank system?**

- ☐ Same as operator.  
☐ Other. Fill out below.

Business name or government agency / branch / department

Last name	First name	Position title
Email	Phone	Fax
Mailing Address		
UNIT # (OPTIONAL)	STREET NUMBER AND NAME, OR P.O. BOX NUMBER	CITY OR TOWN
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**Part 2.2 — Replacement, abandonment, removal or closure of storage tank systems****A. If known, how long has the storage tank(s) been located at this site?****B. How long has the storage tank(s) been out of service?****C. Are any tank(s) being replaced, abandoned, removed or closed suspected to be or identified as leaking?**

- ☐ No  
☐ Yes. Provide details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**D. Who is conducting the work?**

- ☐ Same as operator.  
☐ Other. Fill out below.

Business name or government agency / branch / department

Last name	First name	Position title
Email	Phone	Fax
Mailing Address		
UNIT # (OPTIONAL)	STREET NUMBER AND NAME, OR P.O. BOX NUMBER	CITY OR TOWN
PROVINCE OR TERRITORY		POSTAL CODE

**Part 3.0 — Signature**

I, \_\_\_\_\_, certify that I am the authorized representative of  
PRINT NAME CLEARLY  
\_\_\_\_\_, and the information provided on this application form  
BUSINESS/PERSON TO BE NAMED ON THE PERMIT  
in its entirety and on all attached documents is correct and complete to the best of my knowledge.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

\_\_\_\_\_  
NUMBER OF ATTACHMENTS

This information is being collected under the authority of section 10 of the *Storage Tank Regulations*. Permits and related documents may be included on a public register as required by these regulations and/or disclosed to the public.

For further information contact Building Safety and Standards at (867) 667-5741 or toll free at 1-800-661-0408 ext. 5741.