625 Robert St. N., St. Paul, MN 55155-2538 www.mda.state.mn.us

Pesticide & Fertilizer Management Division, Ph. 651-201-6274

REQUIRES NEW PERMIT NUMBER:

Minn. Stat. Sec.18C.305

BULK PESTICIDE/FERTILIZER STORAGE - NEW PERMIT APPLICATION IN 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 se | rvices in the stat | e? Yes | or No | If yes, ente | er MN Tax ID numbe | r in the space | provided below . | | | | |
|---|---|---------------------------|--------------------------------------|---|-----------------------|----------------------------|----------------------|--|--|--|--|
| Legal Company Name: | | | | MN Tax ID or if none, Social Security Number: | | | | | | | |
| DBA (if different): | | | | Mailing Address (if different): | | | | | | | |
| Physical (911) Address | of Proposed Perm | nit Site (N | o PO Box): | City: | | State: | Zip Code: | | | | |
| City: State: Zip Code: | | | | | Company Telephone: | | | | | | |
| County: | | | | Contact Person: | | | | | | | |
| Change in Ownership | Applications Onl | y: Lis | st former legal o | L company na | ame(s) and address(e | s) involved in C | Change of Ownership. | | | | |
| | | | | | | | | | | | |
| Legal Description | Township Nam | ne | Township De | signation | Range Designation | Section | 1/4 of 1/4 Section | | | | |
| Permit Fees (for new | or existing site lo | cations th | at do not curre | ntly hold a l | oulk storage permit): | • | \$100.00 | | | | |
| New Bulk Fertilize New Bulk Combin Change in Owner Please provide brief | ned Pesticide/Fert ship Permit Appli | ilizer Faci cation Fee | ility/(liquid and/o | or dry)/ | ermit Application Fee | 600290 600326 | ` ' | | | | |
| Penalty Fee (if applic | able): | | | | | | \$250.00 | | | | |
| ☐ Constructing a ne ☐ Constructing a ne ☐ Constructing a ne ☐ Return this form with | ew Bulk Fertilizer f ew Bulk Combinat | Facility Wi | ithout a Permit ide/Fertilizer Fa | | out a Permit | 600326 600290 600326 | 0(3510) | | | | |
| MINNESOTA DEPA A 625 Ro | RTMENT OF AGRI ttn: Cashier obert Street North ul, MN 55155-2538 | CULTURE | | | | TOTAL I | DUE: \$ | | | | |
| I hereby certify that the | information conta | ined in ar | nd submitted wi | th this form | is true and correct. | | For Office Use Only | | | | |
| Signature: | | | Da | nte: | | | | | | | |
| Name (Please print): | | | Tit | tle: | | | | | | | |
| Contact Telephone: | | | Fax Number: | | | | | | | | |
| E-mail Address: | | | | | <u></u> | | | | | | |



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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.

| (MDA) to Cease & Desist a | II construction a | activity until a permit h | nas been gra | nted by tr | ie MDA aid | ong with po | ssible en | forcement | action. | | |
|---|----------------------|--|-----------------|------------------|--------------|---------------------|-------------|---------------|---------------|--|----------------|
| 1. Provide facility EPA Es | tablishment N | lumber if permit app | lication invo | lves con | struction | of a new B | Bulk Pest | icide Faci | lity. | | |
| EPA Establishment Num | nber: | | | | | | | | | | |
| Check if permit ap | plication is for | Bulk Fertilizer Only | | | | | | | | | |
| 2. Name of contractor(s) | or company in | volved in constructi | ng or install | ing this | safeguard | : | | | | | |
| Contractor Name: | | | Addres | _ | _ | | | | Telepho | one: | |
| <u>gomuete Hame.</u> | | | <u>/ 100.00</u> | <u>2.</u> | | | | | <u> </u> | <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u> | |
| | | | | | | | | | | | |
| 3. Provide a copy of a loc | al permit letter | r of authorization red | quired by ar | y local u | nit of gov | ernment (c | city, cou | nty, etc) fo | r new co | nstructio | on being |
| proposed. | | | | | | | | | | | |
| ☐ Check if building p | ermit is not cur | rrently available, but w | vill be submit | ted <u>prior</u> | o construc | <u>tion</u> | | | | | |
| Check if no local | building permit | or authorization is red | quired for this | propose | d construc | tion | | | | | |
| 4. Quarter Mile Map. | | | | | | | | | | | |
| Attach a copy of a detail facility and include the fo | • | | | _ | | | / label an | d show the | location o | of the nev | w proposed |
| A. Distance and direction land and other land it. | | s, businesses, schools | s, nursing ho | mes, hos | pitals, with | in 1/4 of the | e propos | ed new fac | ility. Also ı | note crop | oland, forest |
| B. Distance and direction1/4 mile of the proportion | | | rivers, lakes | , ponds, v | vetlands, e | etc.), draina | age ditche | es and dow | n gradien | t storm se | ewers within |
| C. Is there a municipal | well within 1/4 n | mile of the facility?* | ☐ Y | es 📮 | No | | | | | | |
| *If yes, indicate well | site on quarter r | mile map and note the | e distance fro | m the pro | posed cor | nstruction o | n map aı | nd here: | | | _ |
| 5. Facility Map/Diagram | | | | | | | | | | | |
| Map/diagram of your fac | ility property that | at clearly outlines you | ır property ar | d shows | the location | n of the nev | w propos | ed facility/s | safeguard. | . (This m | ap is separate |
| from the quarter mile an | | = | | | | | | | | | |
| *Maps should indicate n | | | | also be cl | ose to scal | e. | | | | | |
| A. Indicate clearly on the | | | | | | | | | | | |
| B. Label and show all b | • | | | | | | | | | | |
| C. Indicate and label all | • | • | | | | • | loading I | nave occur | red. | | |
| D. Indicate where all steE. Show location of all stems | | | | | | | guard. | | | | |
| | | of the proposed safeg | | | | | | ☐ Yes | ☐ No | , | |
| 6. Dravida construction | drawin aa /alan | a (ta asala) far asah | of the prope | | | | | | | | |
| 6. Provide construction of | • | ` , | | | • | | | | ملد مانحداد | _+ :f: | ::!ll |
| Plans must include mate how the safeguard will be constructed. (Indicate al the safeguard will be bu | pe constructed a | and made water tight. | Drawings m | ust includ | e details th | nat show ho | ow all floo | or, wall/floo | r and wall | joints wil | ll be |
| | | n without detailed con on the safeguard until | | | | _ | d will be | built. | | | |
| 7. If changing and/or add | ling tanks/bins | s, provide informatio | n for new ta | nks/bins | along wit | h all other | remaini | ng tanks/ | bins curre | ently list | ed on your |
| permit. (See page #3) – Comple | ately fill out all n | required information fo | or tank(s)/hin | (s) heina | added Tar | ak informati | ion is loc | ated on the | ton of the | a nage wi | hilo hin |
| information is located or | | | | | | ik ii ii Oi i ii au | 1011 13 100 | ateu on the | τορ οι της | , page wi | TING DITT |
| 8. Provide calculations for | or all proposed | d secondary contain | ment safegu | ıards bei | ng propos | sed. | | | | | |
| (See pages #4 and #5) storage. These pages a | | | | | | | ed secon | dary conta | inment sy | stems for | r bulk liquid |
| 9. If permit application in and types of plumbing | | | | | | | | | cations, c | ompositi | ion, diameter |
| Are all wetted parts fron | n the tank outlet | t to and including the t | first valve (in | cluding b | ung, nipple | s, and all p | olugs) sta | inless stee | l? | Yes | ☐ No |

(This is a requirement for all pesticide tanks and is strongly recommended for all fertilizer tanks.)

| 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 fro 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? |
| 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. |
| |
| |
| If yes, will your company have all the required signage requirements in place prior to storing bulk fertilizer? Yes No |
| 13. For new proposed dry bulk fertilizer facilities: |
| Will there be pesticide impregnation done in the new facility? |
| If Yes, will firm have adequate secondary containment for minibulk tanks and inductor? |
| 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: |
| |
| |

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

Attachment 1 (Reference Section 7)

Pesticide and/or Fertilizer Tank/Bin Data

Liquid Storage Tank Data List all tanks within the dike(s), including water, rinsate, surfactant, fuel tanks, etc.

| | | | | | | | Dike No.1 |
|--|--|--|--|--|--|--|---------------------------------------|
| | | | | | | | Dike No.1 Type of Dike 2 |
| | | | | | | | Dike 3 Material |
| | | | | | | | Roofed/ Unroofed |
| | | | | | | | Tank No. |
| | | | | | | | Tank Capacity |
| | | | | | | | Unit of 4 Measurement |
| | | | | | | | Tank Dimensions ⁵ |
| | | | | | | | Vert./ Horiz. |
| | | | | | | | Tank is Made of ⁶ |
| | | | | | | | Cone/ Flat Bottom |
| | | | | | | | Ht. Floor to Cone |
| | | | | | | | External Tank Sight Age Gauge (Years) |
| | | | | | | | Tank Age (Years) |
| | | | | | | | Product Stored ⁸ |
| | | | | | | | Previous Product Stored |

 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

⁶Mild Steel, Stainless Steel, Poly.

⁷Yes or No.

⁸Product Name (i.e. Harness, Roundup, Dual, 28-0-0, Water, Rinsate, Surfactant, Fuel).

¹Dry Bulk Pesticide Tank, Dry Bulk Fertilizer Bin, Dry Bulk Fertilizer

Dry Storage Tank/Bin Data

| | | | Dike No. |
|--|--|--|-------------------------------------|
| | | | Type of ₁ Tank/Bin |
| | | | Roofed/ Tank/Bin Unroofed No. |
| | | | Tank/Bin No. |
| | | | Unit of 2 Measurement |
| | | | Tank/Bin 3 Dimensions |
| | | | Vert./ ₄ Horiz. |
| | | | Tank/Bin is Made of ⁵ |
| | | | Product Stored |

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

¹Dike number must correspond to facility map.

²Pesticide Dike, Fertilizer Dike, Combination Pesticide/Fertilizer Dike, Combination Dike/Load Area.

³Concrete, Metal, Poly, Synthetic, Masonry.

⁴Gallons, Tons, Cubic Feet.

²Tons, Cubic Feet.

³List in feet (i.e. 6'4" = 6.33 feet). List diameter/width, height, and length.

⁴Vertical = tank storage, Horizontal = bin storage.

⁵Mild Steel, Concrete, Concrete/Wood.

Secondary Containment Calculations

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

* Use tank information from Section 7 (Attachment 1).

.1955

.50

.5000

.75

1.0000

1.00

- ** Convert all dimensions to feet (i.e. 6'4'' = 6.33').
- *** All capacities are in gallons.

CALCULATIONS FOR CONTAINMENT REQUIRED

| 1 | Dike Number | : ۱۹۵۱) | a separate calculation | n sheet for each dike | | EQUIRED | | |
|----|-----------------------|---------------------|------------------------------|---------------------------|---------------------------|------------------------|-----------------------|-------------------|
| _ | | , | • | | , | andary containment | oroo by | |
| ۷. | 1.25 (unroofed) or | | largest tank (pesticid | e, lertilzer, water, fill | isate, etc.) in the sec | ondary containment | area by | |
| | Largest tank capa | acity (Tank # |): | gallons x | [1.25 (uni | roofed) or 1.1 (roofed | d)] = | |
| 3. | Vertical tank disp | lacement (gallons). | | | | | | |
| | NOTE: Cone bott | om tanks whose ou | utlet is above the hei | ght of a dike wall do | not need to be calcul | ated. | | |
| | Tank 2 diam | ft .x Tan | k 2 diam | ft .x .785 x dike v | vall ht | ft .x 7.48 = | | |
| | | | | Total gallo | ons displacement for | Tank 2 = | | |
| | Tank 3 diam | ft .x Tar | nk 3 diam | ft .x .785 x dike | wall ht | _ ft .x 7.48 = | | |
| | | | | Total gallo | ons displacement for | Tank 3 = | | |
| | Tank 4 diam | ft .x Tar | nk 4 diam | ft .x .785 x dike | wall ht | _ ft .x 7.48 = | | |
| | | | | Total gallo | ons displacement for | Tank 4 = | | |
| | Tank 5 diam | ft.x Ta | nk 5 diam | ft .x .785 x dike | wall ht | _ ft .x 7.48 = | | |
| | | | | Total gallo | ons displacement for | Tank 5 = | | |
| | Tank 6 diam | ft.x Ta | nk 6 diam | ft .x .785 x dike | wall ht | _ ft .x 7.48 = | | |
| | | | | Total gallo | ons displacement for | Tank 6 = | | |
| | Tank 7 diam | ft .x Ta | nk 7 diam | ft .x .785 x dike | wall ht | _ ft .x 7.48 = | | |
| | | | | | | Tank 7 = | | |
| | Tank 8 diam | ft.x Ta | nk 8 diam | ft .x .785 x dike | wall ht | ft .x 7.48 = | | |
| | | | | | | Tank 8 = | | |
| | | | | Add tota | al gallone of vartical t | ank displacement (T | ianka 2.9) — | |
| | | | | Add tota | ai gailoris or verticar i | ank displacement (1 | , | t. Tank Displ.) |
| | Tank 3 Dike Wall | Ht. (f | x t.) / Tank Diam. (x | ft.) = conversion fact | = or = Tank 3 Displace | conve | ersion factor (from t | |
| _ | | | | CONVERSIO | N FACTORS | | <u> </u> | |
| | Dike Wall Ht. (ft.) + | Conversion Factor | Dike Wall Ht. (ft.) + | Conversion Factor | Dike Wall Ht. (ft.) + | Conversion Factor | Dike Wall Ht. (ft.) + | Conversion Factor |
| | Tank Diameter (ft.) | | Tank Diameter (ft.) | | Tank Diameter (ft.) | | Tank Diameter (ft.) | |
| | .01 | .0017 | .26 | .2066 | .51 | .5127 | .76 | .8155 |
| | .02 .03 | .0048 .0087 | .27 .28 | .2178 .2292 | .52 .53 | .5255 .5382 | .77 .78 | .8262 .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 .10 | .0446 .0520 | .34 .35 | .2998 .3119 | .59 .60 | .6265 .6389 | .84 .85 | .8967 .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 .24 | .1733 .1845 | .48 .49 | .4745 .4873 | .73 .74 | .7934 .8450 | .98 .99 | .9952 .9983 |
| | ·- · | . 10 10 | | . 1010 | | .5 100 | | .0000 |

| 5. | Enter the totals from section | ons 2,3, and 4 below. Add totals to | gether and enter that total in the tot | al Containment Required space provided: | | | | | | | |
|--|--|--|--|---|---------|--|--|--|--|--|--|
| | Largest tank capacity x | 1 25 or 1 1 | | | | | | | | | |
| | Total vertical tank display | | | | | | | | | | |
| | 4. Total horizontal (round) | | | | | | | | | | |
| | 5. Other displacement (ov | | | | | | | | | | |
| | 6. Add 1,000 gallons for c | ombination dike/load pad | | | | | | | | | |
| | | | TOTAL CONTAINM | MENT REQUIRED = | | | | | | | |
| 6. | Calculate the amount of co | ontainment (gallons) for the second | dary containment: | | | | | | | | |
| | Interior length | ft. x Interior width | ft. x wall height | ft. x 7.48 | | | | | | | |
| | | | TOTAL CONTAINM | MENT PROVIDED = | | | | | | | |
| 7. | | rovided figure in section 6 above is ate. No further work is needed. | s greater than the Total Containmer | t Required figure from section 5 above, your se | condary | | | | | | |
| | If the Total Containment Provided figure in section 6 above is less than the Total Containment Required figure from section 5, you must: | | | | | | | | | | |
| | | A. Increase wall height or increase interior dimensions and | | | | | | | | | |
| | B. Recalculate section 6 a | bove, which must equal or exceed | the Total Containment Required fr | om section 5. | | | | | | | |
| _ | | | | | | | | | | | |
| | (D | | de/Fertilizer Liquid Loading A | | , | | | | | | |
| | (Return all this info | ormation with the permit application | on if a new load pad is being propos | ed and is separate from containment dike above | ə.) | | | | | | |
| 8. | Load Area # | (Use a separate sh | eet for each load area.) | | | | | | | | |
| 9. | A. Length | ft. x width | ft. x average dept | ft. x 7.48 | | | | | | | |
| | (Loading areas must be | curbed 3" in height at the perime | eter.) | | | | | | | | |
| | B. Length | ft. x width | ft. x average dept | ft. x 7.48 | | | | | | | |
| | C. Add the end figure from A and B above. Enter total loading area containment gallons here: | | | | | | | | | | |
| | D. Bulk pesticide liquid loa | D. Bulk pesticide liquid load pad containment requirements: | | | | | | | | | |
| (1) Containers of 500 U.S. gallons or more = Minimum capacity of 1000 gallons. (2) Containers of 250 - 500 U.S. gallons = Minimum capacity of 500 gallons. (3) Containers of less than 250 U.S. gallons = Minimum capacity of 250 gallons. | | | | | | | | | | | |
| | Enter the appropriate minimum capacity figure here: | | | | | | | | | | |
| | E. Compare the appropriate figure listed in D with the figure in C. If C is less than D: | | | | | | | | | | |
| | (1) Increase average depth of loading area <u>or</u> | | | | | | | | | | |
| | (2) Increase dimensions of loading area <u>and</u> | | | | | | | | | | |
| | (3) Recalculate A or B, | , so that the total equals or exce | eeds D. | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |