

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:

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.

Fertilizer License Number: _____

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 (permit) with 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 requires access. If you are unsure if you need a Minnesota Tax ID, contact the Minnesota Department of Revenue at www.taxes.state.mn.us.

BUSINESS INFORMATION

Legal Name			MN Tax ID or if none, Social Security Number		
DBA (if different)			Mailing Address (if different)		
Physical (911) Address of Proposed Permit Site (No PO Box)			City	State	Zip Code
City	State	Zip Code	Company Telephone		
County			Contact Person		

CHANGE IN OWNERSHIP APPLICATIONS ONLY – LIST FORMER ENTITY/ENTITIES AND LOCATIONS INVOLVED IN CHANGE OF OWNERSHIP

List former entity/entities and locations involved in Change of Ownership.

LEGAL DESCRIPTION

Township Name	Township Designation	Range Designation	Section	1/4 of 1/4 Section
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LOCAL PERMIT / CONSTRUCTION / CONTRACTOR INFORMATION – FOR NEW FACILITY PERMIT APPLICATION ONLY

Is a local permit required? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, submit a copy of the local permit approval document.	Has construction already begun? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Contractor	Telephone	Email
Welding Contractor (if different than contractor)	Telephone	Email

PERMIT FEES

New Facility/Change in Ownership Permit Application Fee.	\$ 100.00	600290(3100)
Penalty for constructing or substantially altering an anhydrous ammonia facility without a permit.	\$ 250.00	600290(3510)
Total Due	\$	

RETURN THIS FORM WITH YOUR CHECK MADE PAYABLE TO FOR OFFICE USE ONLY

Minnesota Department of Agriculture Attn: Cashier 625 Robert Street North Saint Paul, MN 55155-2538 Fees are not transferrable or refundable.	Date Application Fee Payment Received
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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 INFORMATION NOTED IN 1-9. Use the Permit Application Worksheet to assist in compiling the 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.
	1. 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:
	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
	I. Nurse 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
	7. NH3 safety training records
	8. NH3 safety equipment for storage facility
	A. Each storage facility installation
	B. Cargo Tank (i.e. transport) transporting anhydrous ammonia
	9. Incident Response Plan
	10. Welding & Welder Qualification Documents: WPS-QW482, PQR-QW483, and WPQ-QW484

FACILITY AND CONTRACTOR CERTIFICATIONS OF ACCURATE/COMPLETE ANHYDROUS AMMONIA PERMIT APPLICATION

FACILITY 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:	

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:			
Office #:	Cell #:	Email Address:	