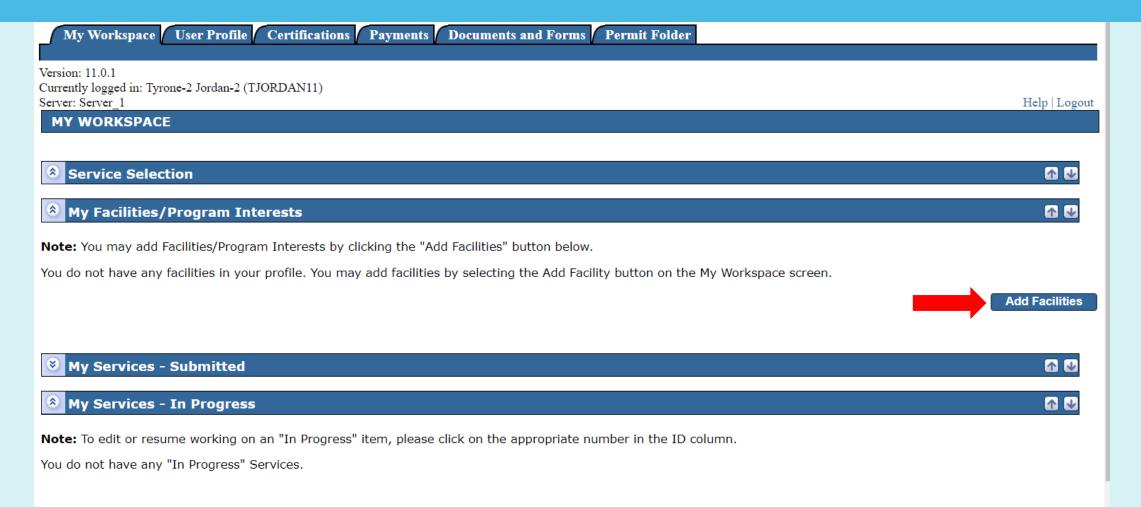
Annual Renewal/Modification of UST Facility Registration Training for NJDEPONLINE.COM

March 6, 2023



My Workspace





Facility Search



	Ser Profile Certifications Payments Documents and Forms Permit Folder Cert PIN Edit Facility Selection Favorite Contacts Security Administration						
Version: 10.1.07 Currently logged in: NICOLI Server: Server_1	E LELIEVRE (NICOLELELIEVRE) Help Logout						
	FACILITY SEARCH	П					
1 - Specify Search Criteria	In most cases your Program Interest Number is your Facility ID.						
2 - Select Facilities Please Note You may click on a	Users adding NJPDES Permits to their profile should do so by selecting the "Water Quality" value from the NJDEP Program option. The user should then enter the NJPDES permit number they wish to add to their profile in the "Facility ID" field and click on the Search button.						
previously visited page (above) to navigate back to that screen.	Pick the search you want to perform: 						
	 Retrieve NJPDES Permit Numbers (Need NJDEP Program and NJPDES permit # for search) Retrieve the facilities that are associated with an Alternate ID Retrieve all Program Interest records for a specific NJDEP Program Interest Type (No facility ID or name needed for search) 						
	(Optional) Select NJDEP Program:						
	Enter either a Facility ID or a Facility Name (if searching by Alternate ID, enter as the Facility ID):						
or l	Facility ID: 868908 (For NJPDES Facilities Use The NJPDES Permit Number)						
or	Facility Name:						

Facility Search Results



njaep nome i about dep i index by topic i programs/units i dep online

My Workspace User Profile Certifications Payments Documents and Forms Permit Folder

Edit Personal Info| Change Cert PIN| Edit Facility Selection| Favorite Contacts| Security Administration

ersion: 10.1.07

urrently logged in: NICOLE LELIEVRE (NICOLELELIEVRE)

erver: Server 1

Help | Logout

- Specify Search Criteria

FACILITY SEARCH RESULTS

Please select the facilities you wish to add to your profile. Once you are done selecting facilities, click the 'Add Selected Facilities' button.

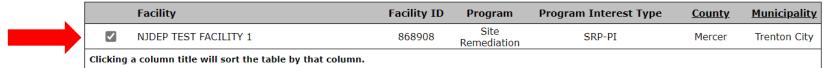
Any facilities matching your search criteria that are currently associated with your profile will be separated from the search results and placed into a smaller datagrid above your search results. These facilities will also be automatically added to your selected facilities so that you may change your access type, if needed.

2 - Select Facilities Please Note

You may click on a previously visited page (above) to navigate back to that screen.

Facilities already in your user profile:

Facilities currently not in your user profile:



Clear/Check All

Add More Facilities

Add Selected Facilities

Cancel



Facility Search Results



njdep home I about dep I index by topic I programs/units I dep online

My Workspace | User Profile | Certifications | Payments | Documents and Forms | Permit Folder

Edit Personal Info Change Cert PIN Edit Facility Selection Favorite Contacts Security Administration

Version: 10.1.07

Currently logged in: NICOLE LELIEVRE (NICOLELELIEVRE)

Server: Server 1

Help | Logout

1 - Specify Search Criteria

2 - Select Facilities

Please Note

You may click on a previously visited page (above) to navigate back to that screen.

FACILITY SEARCH RESULTS

Please select the facilities you wish to add to your profile. Once you are done selecting facilities, click the 'Add Selected Facilities' button.

Any facilities matching your search criteria that are currently associated with your profile will be separated from the search results and placed into a smaller datagrid above your search results. These facilities will also be automatically added to your selected facilities so that you may change your access type, if needed.

Facilities already in your user profile:

Facilities currently not in your user profile:

		Facility	Facility ID	Program	Program Interest Type	<u>County</u>	<u>Municipality</u>
		IMPERIAL NURSERIES	86890900000	Right To Know		Out Of State	Out Of State
	~	NJDEP TEST FACILITY 2	868909	Site Remediation	SRP-PI	Ocean	Toms River Twp
	Clicking	g a column title will sort the table by that column.					

Clear/Check All

Add More Facilities

Add Selected Facilities

Cancel

My Workspace



Version: 10.1.07
Currently logged in: NICOLE LELIEVRE (NICOLELELIEVRE)
Server: Server_1

Help | Logout

MY WORKSPACE

Your facilities have now been added to your workspace.

Service Selection

My Facilities/Program Interests

Note: You may add Facilities/Program Interests by clicking the "Add Facilities" button below.

Facility Name	Facility ID	Program	Access Type	Access Status	Change Manage Access Security	View	Remove
NJDEP TEST FACILITY 1	868908	Site Remediation	General	Granted	&	~	8
NJDEP TEST FACILITY 2	868909	Site Remediation	General	Granted	4		3
Clicking a column title will sort the table b	y that column.						

Add Facilities

My Workspace



department of environmental protection

njdep home I about dep I index by topic I programs/units I dep online

My Workspace | User Profile |

Certifications | Payments |

Documents and Forms Permit Folder

Version: 10.1.07

Currently logged in: NICOLE LELIEVRE (NICOLELELIEVRE)

Server: Server 1

MY WORKSPACE





Help | Logout

Note: Access to this electronic service selection and submittal area is granted by selecting facilities using the user profile. Some services are accessible without selecting facilities as shown below.

Underground Storage Tank (UST) Program

UST Registration Services **UST Additional Certification Service** Submission Approval Area

Configure Services

Instructions



My Workspace

User Profile | Certifications | Payments | Documents and Forms | Permit Folder

Version: 10.1.07

Currently logged in: NICOLE LELIEVRE (NICOLELELIEVRE)

Server: Server 1

Help | Logout

1 - Instructions

2 - Submission Type Selection

Please Note

You may click on a previously visited page (above) to navigate back to that screen.

INSTRUCTIONS

Completion of this UST Facility Certification Questionnaire will satisfy the registration requirements of the Underground Storage of Hazardous Substances Act, N.J.S.A. 58:10A-21 et seq., and the Underground Storage Tank Rules N.J.A.C. 7:14B et. seq. An owner or operator's submission of false, inaccurate, or incomplete information on this Questionnaire constitutes a violation of these regulations and may result in a delay or denial of a Registration.

For full instructions about online filing of an Initial UST Facility Registration, Annual Renewal/Modification of UST Facility Registration, or a Financial Responsibility Insurance Policy Update, click here: https://www.nj.gov/dep/srp/forms/ust/ust-facility-cert-questionnaire.pdf.

If you need any additional information about UST registration, click here: https://www.nj.gov/dep/srp/bust/.



Submission Type Selection



nidep home I about dep I index by topic I programs/units I dep online

My Workspace

User Profile Certifications Payments Documents and Forms Permit Folder

Version: 10.1.07

Currently logged in: NICOLE LELIEVRE (NICOLELELIEVRE)

Server: Server 1

Help | Logout

- Instructions

2 - Submission Type Selection

Please Note

You may click on a previously visited page (above) to navigate back to that screen.

SUBMISSION TYPE SELECTION

Make choices by clicking on the radio button on the left of the Service Description, then click continue to proceed. Clicking the highlighted link will take you to the online instructions.

Choose 'Annual Renewal/Modification of UST Facility Registration' if you have an UST Registration that you wish to renew or modify. Renewals (and modifications filed during the renewal period) will need to pay the renewal invoice at the end of the service.

Choose 'Financial Responsibility Insurance Policy Update' to update an effective UST Registration with the latest insurance policy or financial responsibility mechanism. Any Facility whose UST expiration date does not coincide with the period of their insurance policy or other financial mechanism must file this service when they are issued a new insurance policy or Financial Responsibility mechanism (except State or Federal facilities which are exempt).

Choose 'Initial UST Facility Registration' if you will be registering a new UST Facility.

- Annual Renewal/Modification of UST Facility Registration
- O Financial Responsibility Insurance Policy Update
- O Initial UST Facility Registration
- 👤 Click on the type description to see more information about that type. If you have dificulty make sure your pop up setting is enabled.



Facility Selection



njdep home I about dep I index by topic I programs/units I dep online

My Workspace User Profile Certifications Payments Documents and Forms Permit Folder

Version: 10.1.07

Currently logged in: NICOLE LELIEVRE (NICOLELELIEVRE)

Server: Server 1

Help | Logout

1 - Instructions

- 2 Submission Type Selection
- 3 Facility Selection
- 4 Submission Name
- 5 Submission Type Details
- 6 Site Information
- 7 UST Selection
- 8 Contacts
- 9 Additional Contact Info
- 10 Attachment Upload
- 11 Add Certifier Type
- 12 Certification

Please Note

You may click on a previously visited page

FACILITY SELECTION

Select a Regulated Underground Storage Tank Facility in order to Renew or Modify the UST Registration. If an Annual Renewal Invoice has been issued, it must be paid at the end of the service. To add a facility that is not on the list, click the 'click here' link below the grid. The facility must have an existing UST Registration that is Pending, Effective, or Expired to continue.

Select	Facility	Facility ID	Facility Type	Municipality	Address				
0	NJDEP TEST FACILITY 1	868908	SRP-PI	Trenton City	401 E State St				
0	NJDEP TEST FACILITY 2	868909	SRP-PI	Toms River Twp	1510 Hooper Ave				
Clicking a c	Clicking a column title will sort the table by that column.								

If you do not see the Facility you are looking for, it may be because the facility has not been added to your user profile. To search for facilities and add them to your profile, please click here.

> Continue Clear

Facility Selection



nidep home I about dep I index by topic I programs/units I dep online

My Workspace User Profile Certifications Payments Documents and Forms Permit Folder

Version: 10.1.07

Currently logged in: NICOLE LELIEVRE (NICOLELELIEVRE)

868908

NJDEP TEST FACILITY 1

Help | Logout

Server: Server 1

- 1 Instructions
- 2 Submission Type Selection
- 3 Facility Selection
- 4 Submission Name
- 5 Submission Type Details
- 6 Site Information
- 7 UST Selection
- 8 Contacts
- 9 Additional Contact Info
- 10 Attachment Upload
- 11 Add Certifier Type
- 12 Certification

FACILITY SELECTION

A renewal bill was found and \$50 will be due after Certification, click continue to proceed.

Select a Regulated Underground Storage Tank Facility in order to Renew or Modify the UST Registration. If an Annual Renewal Invoice has been issued, it must be paid at the end of the service. To add a facility that is not on the list, click the 'click here' link below the grid. The facility must have an existing UST Registration that is Pending, Effective, or Expired to continue.

Select	Facility	Facility ID	Facility Type	Municipality	Address			
•	NJDEP TEST FACILITY 1	868908	SRP-PI	Trenton City	401 E State St			
0	NJDEP TEST FACILITY 2	868909	SRP-PI	Toms River Twp	1510 Hooper Ave			

Clicking a column title will sort the table by that column.

If you do not see the Facility you are looking for, it may be because the facility has not been added to your user profile. To search for facilities and add them to your profile, please click here.

Clear

Continue

Submission Name

previously visited page



njuep nome i about dep i index by topic i programs/units i dep online My Workspace User Profile Certifications Payments Documents and Forms Permit Folder Version: 10.1.07 Currently logged in: NICOLE LELIEVRE (NICOLELELIEVRE) 868909 NJDEP TEST FACILITY 2 Server: Server 1 Help | Logout **SUBMISSION NAME** 1 - Instructions The UST Facility Name below is used to find the service in your Workspace, and in the Certification and Payment tabs if needed. The auto-populated 2 - Submission Type name lists the UST Service Type, The Service ID #, the Facility (PI ID) Number, and the Facility name. Review the auto-populated submission name, Selection and click continue. 3 - Facility Selection Use the Comments field to provide additional information as necessary. 4 - Submission Name *UST Facility Name: Renewal/Mod #1070144@868909 (NJDEP TEST FACILITY 2) 5 - Submission Type Details Comments: 6 - Site Information 7 - UST Selection 8 - Contacts 9 - Additional Contact Info 10 - Attachment Upload * Required 11 - Add Certifier Type 12 - Certification Continue Please Note You may click on a

Submission Type Details



Server: Server 1 NJDEP TEST FACILITY 2 Help | Logot **SUBMISSION TYPE DETAILS** 1 - Instructions Renewal/Mod #1070144@868909 (NJDEP TEST FACILITY 2) 2 - Submission Type Selection 3 - Facility Selection Complete the following information 4 - Submission Name Modification of UST Registration Types (Select all that apply) 5 - Submission Type Details ☐ Registration of a newly installed ☐ Annual Renewal 6 - Site Information underground storage tank(s) 7 - UST Selection UST Facility Name Registration of an existing UST or USTS not presently registered 8 - Contacts ☐ UST Facility Street Address ☐ Change in Type of Product(s) 9 - Additional Contact Stored Info UST Facility Owner and/or Address ☐ Substantial Modification Updates 10 - Attachment ☐ UST Facility Operator and/or ☐ Tank(s) and/or Piping Upload Address 11 - Add Certifier Type Property Owner Name ☐ Closure ☐ Class A or B Operator ☐ Financial Responsibility 12 - Certification ☐ Billing Contact Person ☐ Sale/Transfer of UST Facility Please Note Other (please specify) You may click on a previously visited page (above) to navigate back to that screen. *Will this Registration include tanks to be put back into service? Retail Service Station *Facility Type: \checkmark *Total number of regulated underground storage tanks at facility 30000 *Total capacity of regulated underground storage tanks at facility (gallons)

Submission Type Details continued



Modification of UST Registration Types (Select all that apply)							
☑ Annual Renewal	 Registration of a newly installed underground storage tank(s) 						
UST Facility Name	Registration of an existing UST or USTS not presently registered						
UST Facility Street Address	☐ Change in Type of Product(s) Stored						
UST Facility Owner and/or Address	Substantial Modification Updates						
☐ UST Facility Operator and/or	☐ Tank(s) and/or Piping						
Address							
Property Owner Name	☐ Closure						
☐ Class A or B Operator	Financial Responsibility						
☐ Billing Contact Person	☐ Sale/Transfer of UST Facility						
Other (please specify)							
Substantial Modification(s)							
*Substantial Modification #							
Cathodic Protection							
Lining							
☐ Monitoring System	_						
Other							

Site Information



Server: Server_1

SITE INFORMATION

NUMBER 1EST FACILITY 2

Help | Logour

- 1 Instructions
- 2 Submission Type Selection
- 3 Facility Selection
- 4 Submission Name
- 5 Submission Type Details
- 6 Site Information
- 7 UST Selection
- 8 Contacts
- 9 Additional Contact Info
- 10 Attachment Upload
- 11 Add Certifier Type
- 12 Certification

Please Note

You may click on a previously visited page (above) to navigate back to that screen.

Renewal/Mod #1070144@868909 (NJDEP TEST FACILITY 2)

Please verify the location of the facility. If the information below is not correct contact the NJDEP at srwm_njems@dep.nj.gov. Note: The address and County information is not editable in a Renewal/Modification.

*	Lo	ca	tic	'n	Δd	Ы	ress:
		ca	u	,,,	Au	u	I C33.

*Line 1:

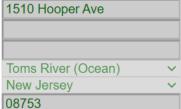
Line 2:

Line 3:

*City:

*State:

*Zip Code:



*County: Ocean

or

Multi-County:

*Municipality: Toms River Twp

0

Multi-Municipality:

The County and the Municipality provided above must directly correspond to the X,Y coordinates provided below.

or

Location Description:

Site Information Continued



☐ I certify that a valid block/lot combination does not apply. Row *Block *Lot *County *Municipality Map Comment	*Block and	d Lot:					
Row *Block *Lot *County *Municipality Map Commen	☐ I certify	that a	valid blo	ck/lot combina	tion does not app	ly.	
	Row	*Block	*Lo	t *County	*Municipality	Мар	Comment

1	394.48	1	Ocean	~	Toms River Tv
Add	Row	Add Ra	nge		

Note: If there is more than one block and/or lot associated with the application, click the Add Row button. If you have the same Block with multiple consecutive Lots, click Add Range. Each block and/or lot must have its own entry line. Only the first Block and Lot listed will be mapped below. If you are adding, modifying, or deleting a Block and Lot row, state in the comment box the reason for the change (i.e., parcel subdivided).

Remove

Note: If there are no valid Block and Lots, and you selected Multi-Municipality and/or Multi-County checkbox above, a new row should be added for each municipality and county where the proposed project will take place. Add "NA" to each block and lot field for these new rows if not auto populated.

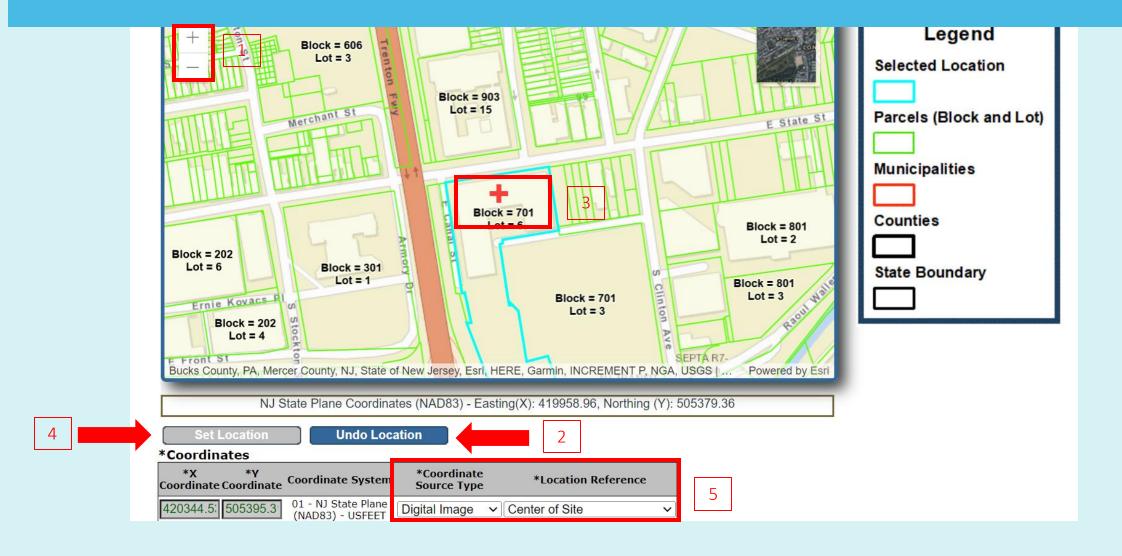
After entering valid location information above, click the Map Location button to update the map below.

If you need to verify the correct location of the property, click "Launch NJGeoWeb" button.



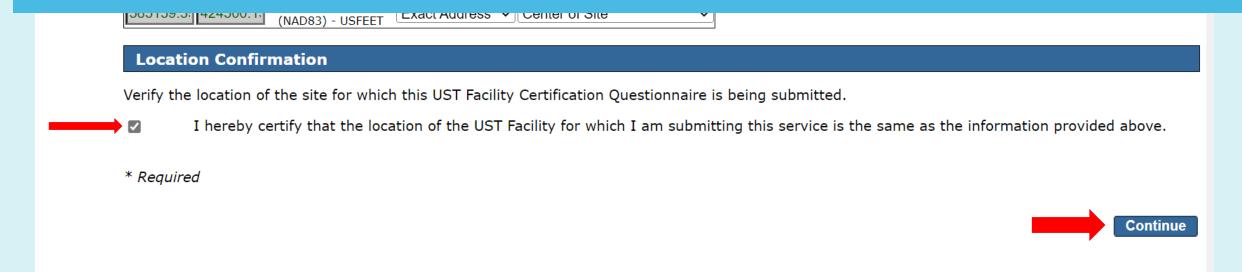
Site Information Continued





Site Information Continued





UST Selection



Version: 10.1.07

Server: Server 1

Currently logged in: NICOLE LELIEVRE (NICOLELELIEVRE)

UST SELECTION

868909

NJDEP TEST FACILITY 2 Help | Logout

1 - Instructions

- 2 Submission Type Selection
- 3 Facility Selection
- 4 Submission Name
- 5 Submission Type Details
- 6 Site Information
- 7 UST Selection
- 8 Contacts
- 9 Additional Contact Info
- 10 Attachment Upload
- 11 Add Certifier Type
- 12 Certification

Please Note

You may click on a previously visited page (above) to navigate back to that screen.

Renewal/Mod #1070144@868909 (NJDEP TEST FACILITY 2)

Please review the tank information below for accuracy. To make changes to the tank information, click on the 'Details' icon. To add a new tank and all the new information, click on the 'Add New Tank' button below. If you prefer to copy the tank details from a similar existing tank, then instead click on the 'Select for Copy' check box for the tank you wish to copy. Then click on the 'Copy Tank Details' button below. Click 'Continue' after verifying all tank details are correct and a validated check exists next to all tanks.

Please note that for the column 'Compartmentalized Group Names', this will be selected in a separate page to follow if appropriate. 'Compartmented tank' (Compartmented Group Name) means any underground storage tank that is divided by one or more walls or bulkheads to create individual and separate compartments within the underground storage tank. Each compartment is a separate regulated tank requiring separate tank identification.

Details	Tank ID	Tank Number	Size (in gallons)	Contents	Compartmentalized Group Name	Other Contents	Out of Status Service/Clos Date	ed Select for copy	Validated Delete
%	168018	T1	10000	Unleaded Gasoline			In-use		
4	168019	T2	10000	Unleaded Gasoline			In-use		②
4	168020	T3a	5000	Unleaded Gasoline	Compartmentalized Tank1		In-use		
4	168021	T3b	5000	Medium Diesel Fuel (No. 2-D)	Compartmentalized Tank1		In-use		②

Copy Tank Details

Add New Tank

Continue

Tank Information



Tank Information	
Please provide a unique tank identificat	tion number (i.e., 001, E1, Tank 01, etc.).
*Tank Number	T1
	nstruction and release detection monitoring are the same. However, the piping construction, pressure/suction For example, a diesel tank that is used to fuel vehicles with pressurized piping, but also supplies fuel to an oply/return lines.
*Is tank dual purpose?	
*Date Tank Installed (MM/DD/YYYY)	02/01/2023 Estimated Date
*Is date piping installed the same as the date the tank was installed?	
*Date Piping Installed (MM/DD/YYYY)	02/01/2023
*Tank Size (Gallons)	10000
*Tank Contents	Unleaded Gasoline V
Tank Location	

Tank Information



Cathodically protected steel - Impressed	☐ Bare steel
current (IC)	Cathodically protected steel - Impressed
Cathodically protected steel - STI-P3	current (IC)
☑ Cathodically protected steel - Sacrificial	Cathodically protected steel - Sacrificial
anode (SA)	anode (SA)
\square Fiberglass-coated steel - Other	Chase - Copper/Fiberglass-reinforced
☐ Fiberglass-coated steel - Total Containment	plastic
☐ Fiberglass-reinforced plastic - Glasteel II	☐ Chase - Copper/HDPE
Fiberglass-reinforced plastic - ACT-100	☐ Chase - Copper/PVC
☐ Fiberglass-reinforced plastic - ACT-100U	Chase - Copper/Polyproplyene
☐ Fiberglass-reinforced plastic - Buffhide	☐ Chase - Other
☐ Fiberglass-reinforced plastic - Elutron	☐ Chase - Primary Steel/ Sec Cont other
☐ Fiberglass-reinforced plastic - Other	☐ Chase - Steel/Fiberglass-reinforced plastic
☐ Fiberglass-reinforced plastic - Xerxes	☐ Chase - Steel/HDPE
☐ Internally lined - Double walled Lining	☐ Chase - Steel/PVC
☐ Internally lined - Phoenix Double walled	☐ Fiberglass-reinforced plastic - Other
Lining	☐ Flex - Ameron
☑ Internally lined - Single Lining	☐ Flex - Co-Flex aka Western Fiberglass
☐ Stand Alone	☐ Flex - Containment Technologies
	☐ Flex - Enviroflex
*Date SA/IC Installed (MM/DD/YYYY)	☐ Flex - Environ
	☐ Flex - Geoflex
**	☐ Flex - Other
*Date of Last Passing CP Inspection (MM/DD/YYYY)	☐ Flex - Perma-Flexx
	☐ Flex - Pisces aka OPW Fueling Components
·····	Flex - Poly-Tech aka Advanced Polymer
*Date Internally Lined (MM/DD/YYYY)	Technology (APT)
Bate Internally Effect (1117/25711117)	☐ Flex - Total Containment
	Other: No Piping Exists
*Date of Last Passing Lining Inspection	
(MM/DD/YYYY)	

Tank and Piping Construction



pply.
Above ground Bare steel Cathodically protected steel - Impressed current (IC) Cathodically protected steel - Sacrificial anode (SA) Chase - Copper/Fiberglass-reinforced plastic Chase - Copper/PVC Chase - Copper/PVC Chase - Copper/Polyproplyene Chase - Other Chase - Other Chase - Steel/Fiberglass-reinforced plastic Chase - Steel/Fiberglass-reinforced plastic Chase - Steel/Fiberglass-reinforced plastic Chase - Steel/PVC Fiberglass-reinforced plastic - Other Flex - Ameron Flex - Co-Flex aka Western Fiberglass Flex - Containment Technologies Flex - Enviroflex Flex - Environ Flex - Geoflex Flex - Other Flex - Perma-Flexx Flex - Pisces aka OPW Fueling Components Flex - Pisces aka OPW Fueling Components Flex - Poly-Tech aka Advanced Polymer

Tank and Piping Structure



Tank and Piping Structure Provide the current information. Check all that apply. **Tank** Pipe 1 Double Wall ✓ Double Wall Type of Monitoring/Detection Provide the current information. Check all that apply. Tank Pipe 1 ☐ Ground water opservation wells Automatic line leak detector ☑ In-tank(automatic)monitoring ☐ Ground water observation wells ✓ Interstitial ☐ In-line electronic pressure monitor Interstitial ☐ Inventory Control ☐ Manual Tank Gauging □ None □ None ☐ Other Other ☐ Other: No Piping Exists ☐ Statistical Inventory Reconciliation ☐ Other: Safe (European) Suction ☐ Statistical Inventory Reconciliation ☐ Tightness Test ☐ Vapor observation wells ☐ Tightness Test ☐ Vapor observation wells

Utilet. NO FIDING EXISTS

Additional Tank Information

Additional Tank Information



Pipe 1 Operation	Pressurized pi	iping	~		
Overfill Protection:					
☑ High level alarm					
☐ Flapper shutoff					
☐ Ball float					
\square None (only for waste oil, sumps	and OOS USTs)				
Spill Containment around Fill Pipe	Yes	~			
Tank Status	In-use	~			
Tank Use:					
☐ Emergency Back-up Generator					
Sump					
Heating Oil for on-site consumpt					
Heating Oil for sale or distribution					
☑ Not for Heating Oil or Sump or E	:mergency Back-	-up			
losure/ Notice of Intent (NOI)#				or	or

Warning: If 'Cancel' is selected, all the changes since save will be lost.

UST Selection



My Workspace / User Profile / Certifications / Payments / Documents and Forms / Permit Folder

Version: 10.1.07

Server: Server 1

Currently logged in: NICOLE LELIEVRE (NICOLELELIEVRE)

868909

NJDEP TEST FACILITY 2 Help | Logout

1 - Instructions

2 - Submission Type Selection

3 - Facility Selection

4 - Submission Name

5 - Submission Type Details

6 - Site Information

7 - UST Selection

8 - Contacts

9 - Additional Contact Info

10 - Attachment Upload

11 - Add Certifier Type

12 - Certification

Please Note

You may click on a previously visited page (above) to navigate back to that screen.

UST SELECTION

Renewal/Mod #1070144@868909 (NJDEP TEST FACILITY 2)

Please review the tank information below for accuracy. To make changes to the tank information, click on the 'Details' icon. To add a new tank and all the new information, click on the 'Add New Tank' button below. If you prefer to copy the tank details from a similar existing tank, then instead click on the 'Select for Copy' check box for the tank you wish to copy. Then click on the 'Copy Tank Details' button below. Click 'Continue' after verifying all tank details are correct and a validated check exists next to all tanks.

Please note that for the column 'Compartmentalized Group Names', this will be selected in a separate page to follow if appropriate. 'Compartmented tank' (Compartmented Group Name) means any underground storage tank that is divided by one or more walls or bulkheads to create individual and separate compartments within the underground storage tank. Each compartment is a separate regulated tank requiring separate talk identification.

Detail	s Tank ID	Tank Number	Size (in gallons)	Contents	Compartmentalized Group Name	Other Contents	Out of Status Service/Closed Date	Select for copy	Validated Delete
4	168018	T1	10000	Unleaded Gasoline			In-use		②
4	168019	T2	10000	Unleaded Gasoline			In-use		②
4	168020	T3a	5000	Unleaded Gasoline	Compartmentalized Tank1		In-use		
4	168021	T3b	5000	Medium Diesel Fuel (No. 2-D)	Compartmentalized Tank1		In-use		②

Copy Tank Details

Add New Tank



Continue

1

2

UST Selection Continued



*Is tank newly installed?	Yes
Tank Information	
Please provide a unique tank identifica	tion number (i.e., 001, E1, Tank 01, etc.).
*Tank Number	T4
	nstruction and release detection monitoring are the same. However, the piping construction, pressure/suction. For example, a diesel tank that is used to fuel vehicles with pressurized piping, but also supplies fuel to an oply/return lines.
*Is tank dual purpose?	No
*Date Tank Installed (MM/DD/YYYY)	02/01/2023 Estimated Date
*Is date piping installed the same as the date the tank was installed?	Yes
*Date Piping Installed (MM/DD/YYYY)	02/01/2023
*Tank Size (Gallons)	10000
*Tank Contents	Unleaded Gasoline v
Tank Location	
Tank and Dining Construction	

UST Selection Continued



	ng 000 0010,	
*Spill Containment around Fill Pipe	Yes	
*Tank Status	In-use v	
*Tank Use:		
☐ Emergency Back-up Generator☐ Sump☐ Heating Oil for on-site consumptio☐ Heating Oil for sale or distribution☐ Not for Heating Oil or Sump or En		_
Closure/ Notice of Intent (NOI)#		
	Cancel Save	Return to UST Selection
	Warning: If 'Cancel' is selected, all the ch	anges since save will be lost.

UST Selection Continued



Currently logged in: NICOLE LELIEVRE (NICOLELELIEVRE)

868909 NJDEP TEST FACILITY 2

Help | Logout

Server: Server 1

UST SELECTION

1 - Instructions

- 2 Submission Type Selection
- 3 Facility Selection
- 4 Submission Name
- 5 Submission Type Details
- 6 Site Information
- 7 UST Selection
- 8 Contacts
- 9 Additional Contact Info
- 10 Attachment Upload
- 11 Add Certifier Type
- 12 Certification

Please Note

You may click on a previously vis (above) to navigate back to that screen.

Renewal/Mod #1070144@868909 (NJDEP TEST FACILITY 2)

Please review the tank information below for accuracy. To make changes to the tank information, click on the 'Details' icon. To add a new tank and all the new information, click on the 'Add New Tank' button below. If you prefer to copy the tank details from a similar existing tank, then instead click on the 'Select for Copy' check box for the tank you wish to copy. Then click on the 'Copy Tank Details' button below. Click 'Continue' after verifying all tank details are correct and a validated check exists next to all tanks.

Please note that for the column 'Compartmentalized Group Names', this will be selected in a separate page to follow if appropriate. 'Compartmented tank' (Compartmented Group Name) means any underground storage tank that is divided by one or more walls or bulkheads to create individual and separate compartments within the underground storage tank. Each compartment is a separate regulated tank requiring separate tank identification.

De	etails	Tank ID	Tank Number	Size (in gallons)	Contents	Compartmentalized Group Name	Other Contents	Out of Status Service/Closed Date	Select for copy	Validated Delete
	ĕ	168018	T1	10000	Unleaded Gasoline			In-use		
4	4	168019	T2	10000	Unleaded Gasoline			In-use		②
	A	168020	T3a	5000	Unleaded Gasoline	Compartmentalized Tank1		In-use		
4	4	168021	T3b	5000	Medium Diesel Fuel (No. 2-D)	Compartmentalized Tank1		In-use		Ø
•	&		T4	10000	Unleaded Gasoline			In-use		3

Copy Tank Details

Add New Tank

Continue



Compartmentalized Tank Selection



Currently logged Server: Server 1

Currently logged in: NICOLE LELIEVRE (NICOLELELIEVRE)

NJDEP TEST FACILITY 2

868909

Help | Logout

COMPARTMENTALIZED TANK SELECTION

Renewal/Mod #1070253@868909 (NJDEP TEST FACILITY 2)

'Compartmented tank' (Compartmented Group Name below) means any underground storage tank that is divided by one or more walls or bulkheads to create individual and separate compartments within the underground storage tank. Each compartment is a separate regulated tank requiring separate tank identification.

Please choose the Compartmentalized Group Name next to each associated separate regulated tank in the drop down. If there are additional "Compartmented tanks" (Compartmented Group Names) please choose the 'Add New Group' button below. Click the 'Continue' button when all Group Names have been completed.

1 - Instructions

2 - Submission Type Selection

- 3 Facility Selection
- 4 Submission Name
- 5 Submission Type Details
- 6 Site Information
- 7 UST Selection
- 8 Compartmentalized Tank Selection
- 9 Contacts
- 10 Additional Contact Info
- 11 Attachment Upload
- 12 Add Certifier Type
- 13 Certification

Please Note

You may click on a previously visited page (above) to navigate back to that screen.

Compartmentalized Group Name	Tank ID		Size (in gallons)	Contents	Other Contents	Status
V	168018	T1	10000	Unleaded Gasoline		In-use
	168019	T2	10000	Unleaded Gasoline		In-use
Compartmentalized Tank1	168020	T3a	5000	Unleaded Gasoline		In-use
Compartmentalized Tank1	168021	T3b	5000	Medium Diesel Fuel (No. 2-D)		In-use
~	168022	T4	10000	Unleaded Gasoline		In-use

Compartmentalized Tank2



Continue

Financial Responsibility

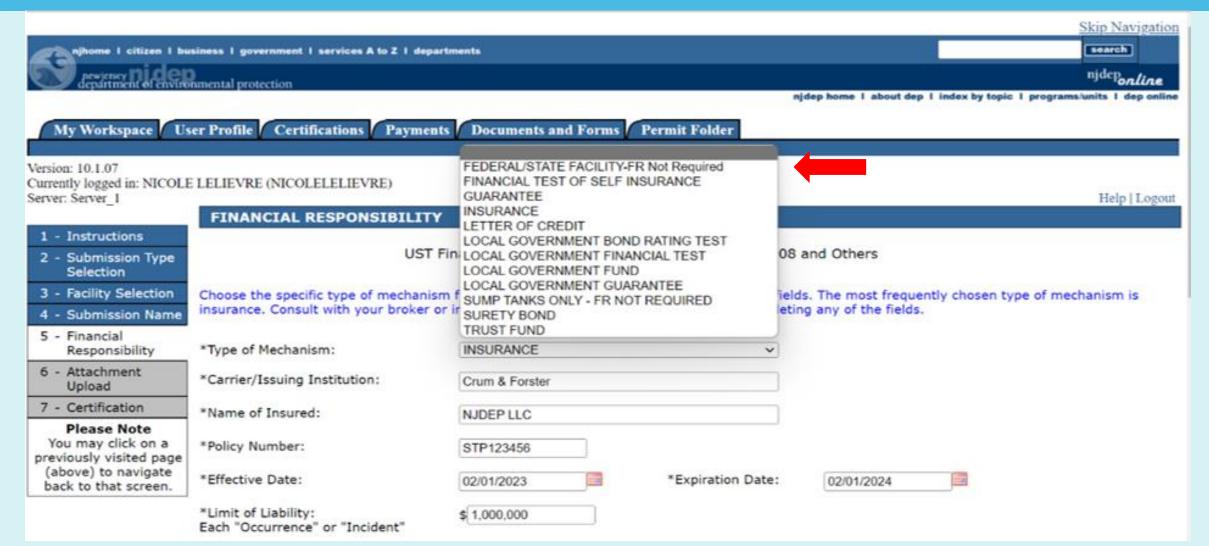


2 - Submission Type Selection	R	enewal/Mod #1070144@86	8909 (NJDEP TEST FACIL	LITY 2)	
3 - Facility Selection	Choose the specific type of mechanism				chosen type of mechanism is
4 - Submission Name	insurance. Consult with your broker o	r insurance agent if you have	questions about completing	g any of the fields.	
5 - Submission Type Details	*Type of Mechanism:	INSURANCE	~		
6 - Site Information	*Carrier/Issuing Institution:	Crum & Forster			
7 - UST Selection	carrier, issuing institution.	Ciuiii & i oistei			
8 - Compartmentalized Tank Selection	*Name of Insured:	NJDEP LLC			
9 - Financial Responsibility	*Policy Number:	STP123456			
10 - Contacts	*Effective Date:	02/01/2023	*Expiration Date:	02/01/2024	
11 - Additional Contact Info	*Limit of Liability: Each "Occurrence" or "Incident"	\$ 1,000,000			
12 - Attachment Upload	*Limit of Liability:	\$ 1,000,000			
13 - Add Certifier Type	Aggregate				
14 - Certification	*Limit of Defense Costs	\$ 250,000			
Please Note You may click on a previously visited page (above) to navigate	*Does this policy have multiple Retroactive Dates?	No			
back to that screen.	*What is the earliest Retroactive Date?:	02/01/2023			

^{*} Required

Financial Responsibility





Financial Responsibility



2 - <u>Submission Type</u> <u>Selection</u>	UST Fi	inancial Responsibility Update #1070143@868908 and Others
3 - Facility Selection 4 - Submission Name		n from the dropdown list and complete all required fields. The most frequently chosen type of mechanism is insurance agent if you have questions about completing any of the fields.
5 - Financial Responsibility	*Type of Mechanism:	INSURANCE
6 - Attachment Upload	*Carrier/Issuing Institution:	Crum & Forster
7 - Certification	*Name of Insured:	NJDEP LLC
Please Note You may click on a previously visited page	*Policy Number:	STP123456
(above) to navigate back to that screen.	*Effective Date:	02/01/2023 *Expiration Date: 02/01/2024
	*Limit of Liability: Each "Occurrence" or "Incident"	\$ 1,000,000
	*Limit of Liability: Aggregate	\$ 1,000,000
	*Limit of Defense Costs	\$ 250,000
	*Does this policy have multiple Retroactive Dates?	No
	*What is the earliest Retroactive Date?:	02/01/2023
	* Required	

Contacts



- 5 Submission Type Details
- 6 Site Information
- 7 UST Selection
- 8 Compartmentalized
 Tank Selection
- 9 Financial Responsibility
- 10 Contacts
- 11 Additional Contact Info
- 12 Attachment Upload
- 13 Add Certifier Type
- 14 Certification

Please Note

You may click on a previously visited page (above) to navigate back to that screen.



1. Real Property Owner

Note: Selecting an option below will replace all information for this contact.

john.smith@njdep.gov

john.smith@njdep.gov

Mr.

John

Smith

Insert From Existing Contact(s)... ✓

- *Salutation:
- *First Name:
- Middle Initial:
- *Last Name:
- Title:
- *E-Mail Address:
- *Confirm E-Mail:
- *Organization Name: NJDEP LLC
- Organization Type:

- *Address Line 1:
- Address Line 2:
- Address Line 3:
- *County: *City:
- *State:
- *Zip Code:

- $\ \square$ Save to My Favorite Contacts
- 401 E. State St.
- ____
- Mercer
- Trenton (Mercer)
- New Jersey
- 08608
- *Type *Contact Number(must be 10 digits) Extension Comments Remove

 [Work Phone Number \checkmark (609) 555-5555

Add Number

Contacts Continued



6 - Site Information 7 - UST Selection 2. UST Facility 4. Class A 5. Class B **7.** 1. Real Property 6. Fee Billing 3. UST Facility 8 - Compartmentalized Owner Operator Operator Operator Contact Installer Owner Tank Selection 9 - Financial 2. UST Facility Owner Responsibility 10 - Contacts 11 - Additional Contact Note: Selecting an option below will replace all information for this □ Save to My Favorite Contacts Info

13 - Add Certifier Type 14 - Certification Please Note

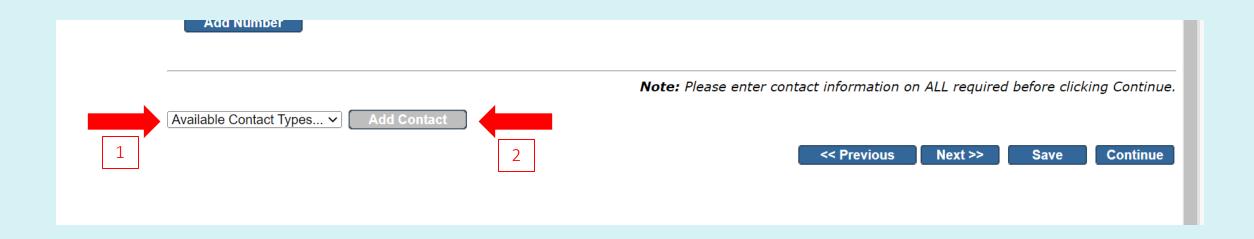
You may click on a previously visited page (above) to navigate back to that screen.

12 - Attachment Upload

4. Class A Operator 5. Class B Operator 6. Fee Billing Contact 7. Installer	LC V	Extension	Comments	Remove	
Real Property Owner UST Facility Operator	h@njdep.gov h@njdep.gov		*Zip Code:	08608	
MY SERVICE CONTACTS	h@nidon gov		*City: *State:	Trenton (Mercer) New Jersey	
MY FAVORITE_CONTACTS			*County:	Mercer	
NICOLE LELIEVRE			Address Line 3:		
MY PROFILE INFORMATION			*Address Line 1: Address Line 2:	401 E. State St.	

Contacts Continued





Contacts Continued



- 6 Site Information
- 7 UST Selection
- 8 Compartmentalized
 Tank Selection
- 9 Financial Responsibility
- 10 Contacts
- 11 Additional Contact Info
- 12 Attachment Upload
- 13 Add Certifier Type
- 14 Certification

Please Note

You may click on a previously visited page (above) to navigate back to that screen.









5. Class B Operator

6. Fee Billing Contact

7. Installer

8. UST Facility Operator

8. UST Facility Operator

Note: Selecting an option below will replace all information for this contact.

Insert From Existing Contact(s)... ✓

- *Salutation:
- *First Name:

Middle Initial:

*Last Name:

Title:

- *E-Mail Address:
- *Confirm E-Mail:
- *Organization Name:

Organization Type:

*Address Line 1:

Address Line 2:

Address Line 3:

- *County:
- *City:
- *State:

*Zip Code:

☐ Save to My Favorite Contacts

V New Jersev

*Type *Contact Number(must be 10 digits) Extension Comments Remove

Add Number

Contacts Continued



Additional Contact Note: Selecting an option below will replace all information for this ☐ Save to My Favorite Contacts Info contact. Insert From Existing Contact(s)... > Attachment Upload *Salutation: Mr. *Address Line 1: 401 E. State St. Add Certifier Type *First Name: Joe Address Line 2: Certification Middle Initial: Address Line 3: Please Note *Last Name: Brown *County: Mercer ou may click on a Title: *City: Trenton (Mercer) viously visited page **New Jersey** *State: *E-Mail Address: joe.brown@njdep.gov bove) to navigate *Zip Code: 08608 ick to that screen. *Confirm E-Mail: joe.brown@njdep.gov *Organization Name: Tank Installers LLC Organization Type: ~ *Contact Number(must be *Type Extension Comments Remove 10 digits) Work Phone Number ∨ (609) 555-5555 **Add Number** Note: Please enter contact information on ALL required before clicking Continue. Available Contact Types... > Add Contact << Previous Next >> Save Continue

Additional Contact Information



NJDEP TEST FACILITY Z Help | Logout **ADDITIONAL CONTACT INFORMATION** Renewal/Mod #1070144@868909 (NJDEP TEST FACILITY 2) A business formed in New Jersey will obtain a Certificate of Formation or Certificate of Authority which will display your NJ Business Entity ID #. An Entity ID is a 10-digit number used to identify your corporate business records. A Tax I.D. number cannot be used. If not applicable, enter N/A. **UST Facility Owner** First Name: John **Last Name:** Smith **Organization Name:** NJDEP LLC *Is the tank owner a corporation, a limited liability company, a partnership, a limited partnership, or other form of business? Yes *NJ Business Entity ID # 0101010101 **UST Facility Operator** Same as Above First Name: John **Last Name:** Smith **Organization Name:** NJDEP LLC *Is the tank owner a corporation, a limited liability company, a partnership, a limited partnership, or other form of business? Yes *NJ Business Entity ID # 0101010101

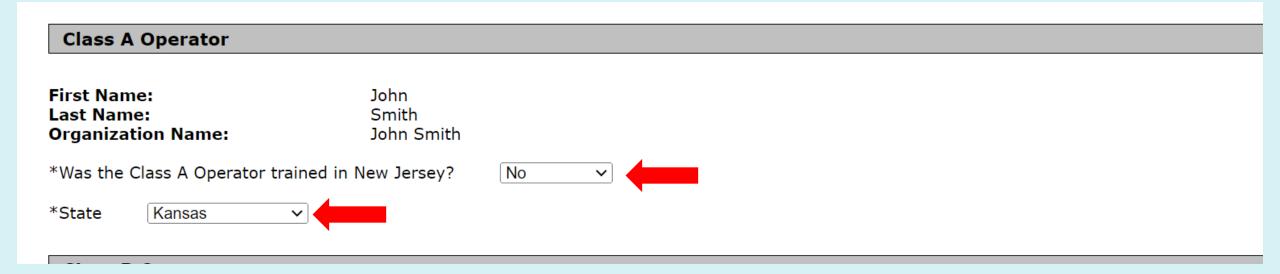


Class A Operator		
First Name: Last Name: Organization Name:	John Smith John Smith	
*Was the Class A Operator train	ed in New Jersey? Yes 🗸	
*Do you have a NJ Class A/B Re	gistration Number and NJ Class A/B Validation number? Yes 🔻	
*NJ Class A/B Registration Num	per	
*NJ Class A/B Validation Numbe	r	

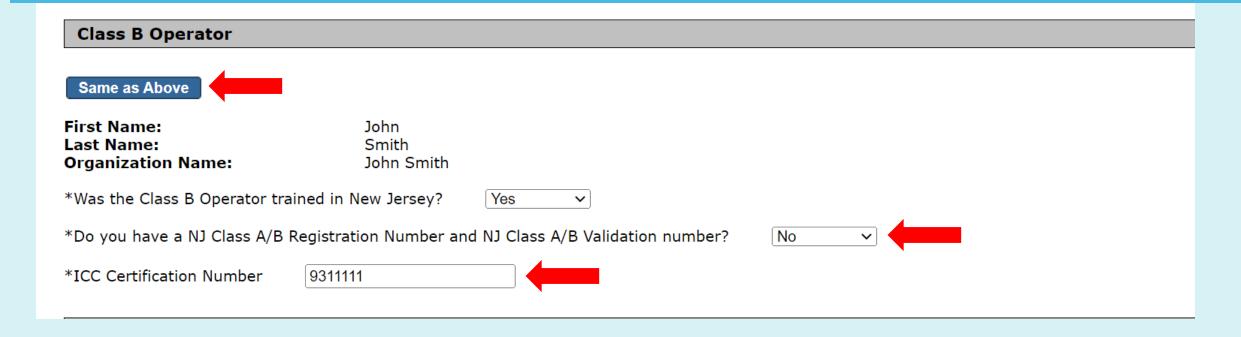


First Name:	John
Last Name: Organization Name:	Smith John Smith
*Was the Class A Operator	,
*Do you have a NJ Class A/	B Registration Number and NJ Class A/B Validation number?
	9311111











First Name: Last Name: Brown Organization Name: *Firm Certification # US 553698 *Individual Certification # 732982 To be completed by installer for new UST installations or returning out-of-service USTs to service. Certification of UST installations of UST system and/or out-of-service UST system is/are properly designed and capable of being put back into service.		Installer
*Individual Certification # 732982 To be completed by installer for new UST installations or returning out-of-service USTs to service. Certification of UST installations or service and/or out-of-service UST system is/are properly designed and capable of being put back into service.	Brown	ast Name:
To be completed by installer for new UST installations or returning out-of-service USTs to service. Certification of UST instal System and/or out-of-service UST system is/are properly designed and capable of being put back into service.	553698	Firm Certification # US
System and/or out-of-service UST system is/are properly designed and capable of being put back into service.	732982	individual Certification #
* Required		Required

Attachment Upload

ATTACHMENT UPLOAD



Server: Server_1 NJDEP TEST FACILITY 1 Help | Logout

1 - Instructions

- 2 Submission Type Selection
- 3 Facility Selection
- 4 Submission Name
- 5 Submission Type Details
- 6 Site Information
- 7 UST Selection
- 8 Compartmentalized Tank Selection
- 9 Financial Responsibility
- 10 Contacts
- 11 Additional Contact Info
- 12 Attachment Upload
- 13 Add Certifier Type
- 14 Certification

Please Note

You may click on a previously visited page (above) to navigate back to that screen.

Renewal/Mod #1070149@868908 (NJDEP TEST FACILITY 1)

On each row, click on the 'Choose File' button under 'Upload File Name', navigate to the file to be uploaded, choose it, and click open. The file will take a minute to upload. The 'Choose File' button will disappear when the file is finished uploading.

To add an attachment, select the type of attachment from the 'Add Attachment' dropdown list below, then click on the blue 'Add Attachment' button.

You are required to submit a Facility Site Plan only for the initial registration of a tank or if there are any changes to the physical configuration of the tank system or property. You must include in the facility site plan the location of the tanks, lines, pumps, dispensers, fill pipes, and other features of the underground storage tank system, including the distance from existing buildings and property boundaries.

If you are submitting a Financial Responsibility insurance Policy, submit the entire current insurance policy. If the insurance policy does not include a certificate of insurance or endorsement, add it as an attachment by selecting it from the 'Add Attachment' dropdown list below.

If you chose Financial Test of Self Insurance or Financial Test for Local Government earlier in the service, applicable forms can be found at: <u>NJDEP SRP - Forms: UST-Related</u>. If your service requires an installer's certification, that form can also be found at the link above.

If you need to upload an authorization to sign on behalf of the Tank Owner and/or Facility Operator, there is no specific form. The authorization should be signed by the Tank Owner and/or Facility Operator as applicable.

Attachment Type	Attachment Description	Allowed Extensions	Upload File Name	Status	File Size (MB)	Remove
*Insurance Policy	Insurance Policy	pdf, doc, docx, xls, xlsx, rtf, gif, jpg, png, tif, zip, txt	Choose File N	ı	0	8
*Installer Certification	Installer Certification	pdf, doc, docx, xls, xlsx, rtf, gif, jpg, png, tif, zip, txt	Choose File No file chosen		0	3
*Site Plan	Site Plan	pdf, doc, docx, xls, xlsx, rtf, gif, jpg, png, tif, zip, txt	Choose File No file chosen		0	8
				Total Uploaded:	0 MB	

^{*} Required

How do I upload a File?



Details

- 6 Site Information
- 7 UST Selection
- 8 Compartmentalized
 Tank Selection
- 9 Financial Responsibility
- 10 Contacts
- 11 Additional Contact Info
- 12 Attachment Upload
- 13 Add Certifier Type
- 14 Certification

Please Note

You may click on a previously visited page (above) to navigate back to that screen.

You are required to submit a Facility Site Plan only for the initial registration of a tank or if there are any changes to the physical configuration of the tank system or property. You must include in the facility site plan the location of the tanks, lines, pumps, dispensers, fill pipes, and other features of the underground storage tank system, including the distance from existing buildings and property boundaries.

If you are submitting a Financial Responsibility insurance Policy, submit the entire current insurance policy. If the insurance policy does not include a certificate of insurance or endorsement, add it as an attachment by selecting it from the 'Add Attachment' dropdown list below.

Attachment Type	Attachment Description	Allowed Extensions	Upload File Name	Status I	File Size (MB)	Remove
*Insurance Policy	Insurance Policy	pdf, doc, docx, xls, xlsx, rtf, gif, jpg, png, tif, zip, txt	crum forster.pdf	Ø	0.03	8
*Installer Certification	Installer Certification	pdf, doc, docx, xls, xlsx, rtf, gif, jpg, png, tif, zip, txt	Installer Cert.pdf	Ø	0.03	8
*Site Plan	Site Plan	pdf, doc, docx, xls, xlsx, rtf, gif, jpg, png, tif, zip, txt	Site Plan.pdf	②	0.03	8
			Total Uploaded:		0.09 MB	

^{*} Required

How do I upload a File?

Add Attachment...

~

Add Attachment

Continue



Details

- 6 Site Information
- 7 UST Selection
- 8 Compartmentalized
 Tank Selection
- 9 Financial Responsibility
- 10 Contacts
- 11 Additional Contact Info
- 12 Attachment Upload
- 13 Add Certifier Type
- 14 Certification

Please Note

You may click on a previously visited page (above) to navigate back to that screen.

You are required to submit a Facility Site Plan only for the initial registration of a tank or if there are any changes to the physical configuration of the tank system or property. You must include in the facility site plan the location of the tanks, lines, pumps, dispensers, fill pipes, and other features of the underground storage tank system, including the distance from existing buildings and property boundaries.

If you are submitting a Financial Responsibility insurance Policy, submit the entire current insurance policy. If the insurance policy does not include a certificate of insurance or endorsement, add it as an attachment by selecting it from the 'Add Attachment' dropdown list below.

Attachment Type	Attachment Description	Allowed Extensions	Upload File Name	Status	File Size	Remove
*Insurance Policy	Insurance Policy	pdf, doc, docx, xls, xlsx, rtf, gif, jpg, png, tif, zip, txt	crum forster.pdf	②	0.03	8
*Installer Certification	Installer Certification	pdf, doc, docx, xls, xlsx, rtf, gif, jpg, png, tif, zip, txt	Installer Cert.pdf	Ø	0.03	8
*Site Plan	Site Plan	pdf, doc, docx, xls, xlsx, rtf, gif, jpg, png, tif, zip, txt	Site Plan.pdf	②	0.03	8
			Total Uploaded:		0.09 MB	

^{*} Required

How do I upload a File?



Continue



riease Note	Site Fiail	Site Figit	jpg, png, tif, zip,	Site Fiant.pui
You may click on a			txt	
previously visited page				Total Uploaded:
(above) to navigate				
back to that screen.	* Required			
	How do I upload a File?			
		_		
	Certificate of Insurance/Endorsement	*		
	Add Attachment	7		
	Certificate of Insurance/Endorsement			
	Financial Responsibility Assurance Mechanism			
	Owner & Operator auth of Representative Signature			



Attachment Type	Attachment Description	Allowed Extensions	Upload File Name	Status	File Size (MB)	Remove
*Insurance Policy	Insurance Policy	pdf, doc, docx, xls, xlsx, rtf, gif, jpg, png, tif, zip, txt	crum forster.pdf	②	.03	8
*Installer Certification	Installer Certification	pdf, doc, docx, xls, xlsx, rtf, gif, jpg, png, tif, zip, txt	Installer Cert.pdf	Ø	.03	8
*Site Plan	Site Plan	pdf, doc, docx, xls, xlsx, rtf, gif, jpg, png, tif, zip, txt	Site Plan.pdf	②	.03	8
Certificate of Insurance/Endorsement	Certificate of Insurance/Endorsement	pdf, doc, docx, xls, xlsx, rtf, gif, jpg, png, tif, zip, txt	crum forster.pdf	Ø	0.03	8
			Total Uploaded:		0.12 MB	

^{*} Required

~



Details

- 6 Site Information
- 7 UST Selection
- 8 Compartmentalized Tank Selection
- 9 Financial Responsibility
- 10 Contacts
- 11 Additional Contact Info
- 12 Attachment Upload
- 13 Add Certifier Type
- 14 Certification

Please Note

You may click on a previously visited page (above) to navigate back to that screen.

You are required to submit a Facility Site Plan only for the initial registration of a tank or if there are any changes to the physical configuration of the tank system or property. You must include in the facility site plan the location of the tanks, lines, pumps, dispensers, fill pipes, and other features of the underground storage tank system, including the distance from existing buildings and property boundaries.

If you are submitting a Financial Responsibility insurance Policy, submit the entire current insurance policy. If the insurance policy does not include a certificate of insurance or endorsement, add it as an attachment by selecting it from the 'Add Attachment' dropdown list below.

Attachment Type	Attachment Description	Allowed Extensions	Upload File Name	Status	File Size	Remove
*Insurance Policy	Insurance Policy	pdf, doc, docx, xls, xlsx, rtf, gif, jpg, png, tif, zip, txt	crum forster.pdf	②	.03	8
*Installer Certification	Installer Certification	pdf, doc, docx, xls, xlsx, rtf, gif, jpg, png, tif, zip, txt	Installer Cert.pdf	Ø	.03	8
*Site Plan	Site Plan	pdf, doc, docx, xls, xlsx, rtf, gif, jpg, png, tif, zip, txt	Site Plan.pdf	②	.03	8
Certificate of Insurance/Endorsement	Certificate of Insurance/Endorsement	pdf, doc, docx, xls, xlsx, rtf, gif, jpg, png, tif, zip, txt	crum forster.pdf	Ø	0.03	8
		-	Total Uploaded:		0.12 MB	

* Required

How do I upload a File?

Add Attachment...

Add Attachment

Add Certifier Type



		njdep nome i about dep i index	by topic 1 programs/units 1 dep online
My Workspace Us	ser Profile Certifications Pays	ments Documents and Forms Permit Folder	
Version: 10.1.07			
Currently logged in: NICOLE Server: Server 1	E LELIEVRE (NICOLELELIEVRE)	868909 NJDEP TEST FACILITY 2	Help Logout
3477417341741_1	ADD CERTIFIER TYPE		110.p 120.gom
1 - Instructions			
2 - Submission Type Selection		Renewal/Mod #1070144@868909 (NJDEP TEST FACILITY 2)	
3 - Facility Selection			
4 - Submission Name			
5 - Submission Type Details	Select Certification Type:	V	
6 - Site Information			Continue Cancel
7 - UST Selection			
8 - Compartmentalized Tank Selection			
9 - Financial Responsibility			
10 - Contacts			
11 - Additional Contact Info			
12 - Attachment Upload			

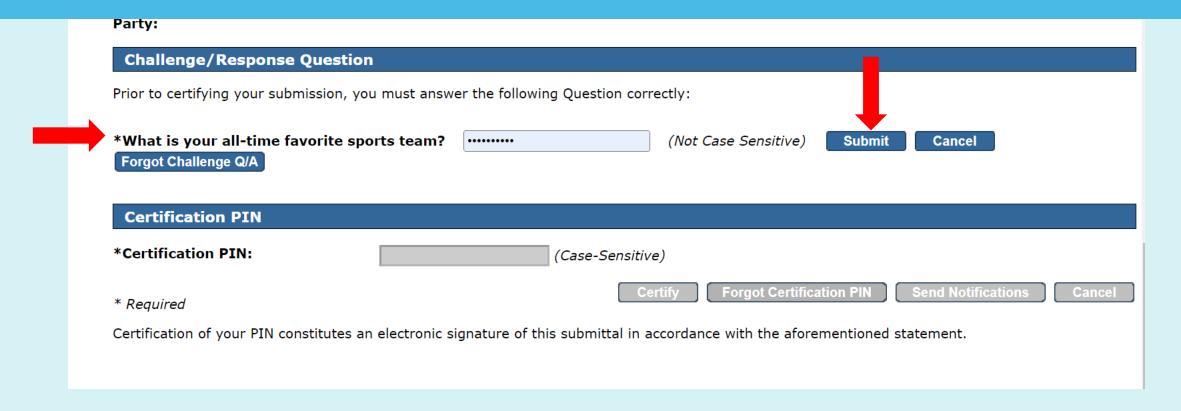




1	<u>SI</u>	kip Navigation
njhome I citizen I bu		search
newersey nider department of enviro		^{njdep} online
	njdep home I about dep I index by topic I programs/ur	nits I dep online
My Workspace Us	er Profile Certifications Payments Documents and Forms Permit Folder	
/ersion: 10.1.12 Ourrently logged in: NICOLE	LELIEVRE (NICOLELELIEVRE) 868909	
erver: Server_1	NJDEP TEST FACILITY 2	Help Logout
1 - Instructions	ADD CERTIFIER TYPE	
2 - Submission Type	Renewal/Mod #1070253@868909 (NJDEP TEST FACILITY 2)	
Selection	,	
3 - Facility Selection		
4 - Submission Name		
5 - Submission Type Details	Select Certification Type:	
6 - Site Information	Facility Owner/Operator	Cancel
7 - UST Selection	Facility Owner/Operator Third Party Or	Gancer
8 - Compartmentalized Tank Selection		
9 - Financial Responsibility		
10 - Contacts		
11 - Additional Contact Info		
12 - Attachment		

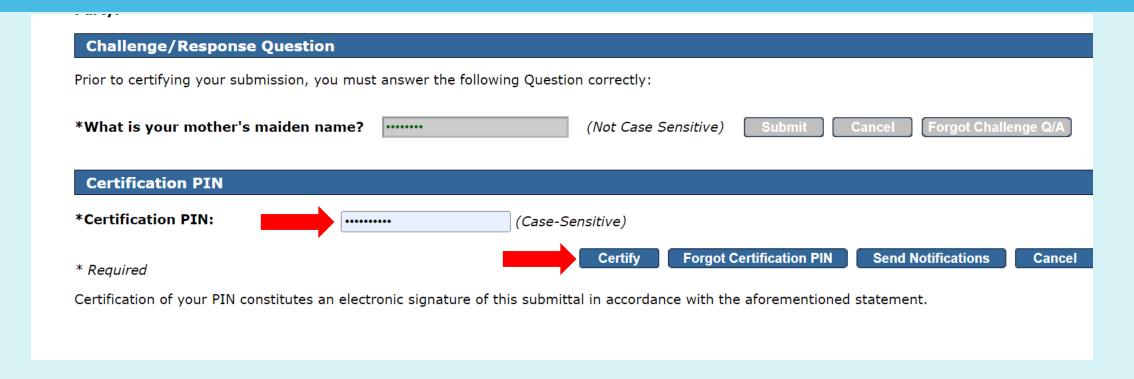
Certification





Certification Continued





Payment Summary



LE LELIEVRE (NICOLELELIEVRE)

868908

NJDEP TEST FACILITY 1

Help | Logout

PAYMENT SUMMARY

Choose your payment method by clicking on the appropriate button below. If you choose 'Bill Me', you will be asked to enter the mailing address information and a bill will be mailed.

Charges

	ID	Facility ID	Facility Name	Program	Service	Туре	Creation Date	Amount
1	070159	868908	NJDEP TEST FACILITY 1	Underground Storage Tank (UST) Program	UST Registration Services	Annual Renewal/Modification of UST Facility Registration	02/08/2023	\$50.00
L							Total	\$50.00
	Clicking a column title will sort the table by that column.							

Pay via Credit Card Pay via eCheck Return

or

Transaction Detail and Summary



Transaction Detail

sku	Description	Unit Price	Quantity	Amount
70001	njdepTest-Annual Renewal/Modification of UST Facility Registration-1070159	\$50.00	1	\$50.00
Total				\$50.00

Payment

Payment Type



Credit/Debit Card

Transaction Summary

njdepTest-Annual
Renewal/Modification of UST Facility \$50.00
Registration-1070159

Government Services

Service Fee \$1.65

Pay now with New Jersey \$51.65

Need Help?

Please complete the Customer Information Section.

Transaction Detail and Summary Continued



		Complete all required f
Country *		
United States		
First Name *	Last Name *	
JOHN	SMITH	
Address *		
401 E STATE ST		⊘
Address 2		
		⊘
City *	State *	
TRENTON	NJ - V	

Transaction Detail and Summary Continued



Credit Card Number * ②	Credit Card Type		nplete all required t
Expiration Month *	Expiration Year *	DISCOVER	DOPRESS (
Select a Month	Select a Year	~	
Security Code * ②			
Name on Credit Card *			

Payment Confirmation



Version: 10.1.07

Currently logged in: NICOLE LELIEVRE (NICOLELELIEVRE)

Server: Server 1 NJDEP TEST FACILITY 1

Help | Logout

868908

PAYMENT CONFIRMATION

Printer Friendly Version

Your transaction was a SUCCESS. Please print this page for your records.

Payment Details

Confirmation Number: TEST123 **Payment Type:** VISA

Transaction Date: 02/08/2023

User Name: NICOLE LELIEVRE

Payment Items

Charges:

ID	Facility ID	Facility Name	Program	Service	Туре	Creation Date	Amount
1070159	868908	NJDEP TEST FACILITY 1	Underground Storage Tank (UST) Program	UST Registration Services	Annual Renewal/Modification of UST Facility Registration	02/08/2023	\$50.00
						Total:	\$50.00

Clicking a column title will sort the table by that column.

Credit Card Service Fee: \$1.65 **Total Amount Charged:** \$51.65

Continue

Service Summary



Version: 10.1.07

Currently logged in: NICOLE LELIEVRE (NICOLELELIEVRE)

868909

NJDEP TEST FACILITY 2

Server: Server 1
SUMMARY

Printer Friendly Version

Help | Logout

Service Information

Service ID: 1070144

Service Type: UST Registration Services: Annual Renewal/Modification of

UST Facility Registration

Service Name: Renewal/Mod #1070144@868909 (NJDEP TEST FACILITY 2)

Created On: 02/08/2023

Submitted On: 02/08/2023

Facility Profile

Facility ID	Facility Name	County	Facility Location	Mailing Address
868909	NJDEP TEST FACILITY 2	Ocean	1510 Hooper Ave Toms River, NJ 08753	1510 Hooper Ave Toms River, NJ 08753

Submission Type Details

Modification of UST Registration Types (Select all that apply)

- Annual Renewal Registration of a newly installed underground storage tank(s)
- □ UST Facility Name □ Registration of an existing UST or USTS

not presently registered

Service Summary Continued



degree if I make a written false statement which I do not believe to be true. I am also aware that if I knowingly direct or authorize the violation of any statute or regulation, I am personally liable for penalties."

NICOLE LELIEVRE

02/08/2023

Facility Owner/Operator

Date





My Workspace



 Λ

MY WORKSPACE

Service Selection

Note: Access to this electronic service selection and submittal area is granted by selecting facilities using the <u>user profile</u>. Some services are accessible without selecting facilities as shown below.

Underground Storage Tank (UST) Program

UST Registration Services
UST Additional Certification Service
Submission Approval Area

Configure Services

↑

My Facilities/Program Interests



Facility Name	Facility ID	Program	Access Type	Access Status	Change Manage Access Security	View	Remove
NJDEP TEST FACILITY 1	868908	Site Remediation	General	Granted	&	~	8
NJDEP TEST FACILITY 2	868909	Site Remediation	General	Granted	4	~	3
Clicking a column title will sort the table	by that column.						

Add Facilities

Additional Certification Required



Version: 10.1.07

Currently logged in: NICOLE LELIEVRE (NICOLELELIEVRE)

Server: Server 1

Help | Logout

1 - Additional Certification

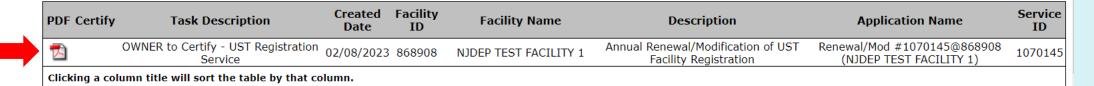
2 - Certification

Please Note

You may click on a previously visited page (above) to navigate back to that screen.

Additional Certification Required

Click the PDF icon to open a PDF of the submission to be certified. Review the PDF thoroughly. Once you close the PDF, a Blue Ribbon icon will appear. Click the Blue Ribbon icon to complete certification of the UST Registration service. If you are a duly authorized representative for the owner and/or operator and you did not attach the required Owner & Operator Authorization of Representative Signature attachment within the portal application, please email to: srpustregistration@dep.nj.gov with the associated PI# in the header.



Return to My Workspace

Additional Certification Required Continued



Version: 10.1.07

Currently logged in: NICOLE LELIEVRE (NICOLELELIEVRE)

Server: Server_1

Help | Logout

1 - Additional Certification

2 - Certification

Please Note

You may click on a previously visited page (above) to navigate back to that screen.

Additional Certification Required

Click the PDF icon to open a PDF of the submission to be certified. Review the PDF thoroughly. Once you close the PDF, a Blue Ribbon icon will appear. Click the Blue Ribbon icon to complete certification of the UST Registration service. If you are a duly authorized representative for the owner and/or operator and you did not attach the required Owner & Operator Authorization of Representative Signature attachment within the portal application, please email to: srpustregistration@dep.nj.gov with the associated PI# in the header.

P	DF Cer	•	Task Description	Date	ID ´	Facility Name	Description	Application Name	Service ID
ŧ	A 🤰	*	OWNER to Certify - UST Registration Service	02/08/2023	868908	NJDEP TEST FACILITY 1	Annual Renewal/Modification of UST Facility Registration	Renewal/Mod #1070145@868908 (NJDEP TEST FACILITY 1)	1070145
C	lickip	rolu	umn title will sort the table by that co	olumn.					

Return to My Workspace

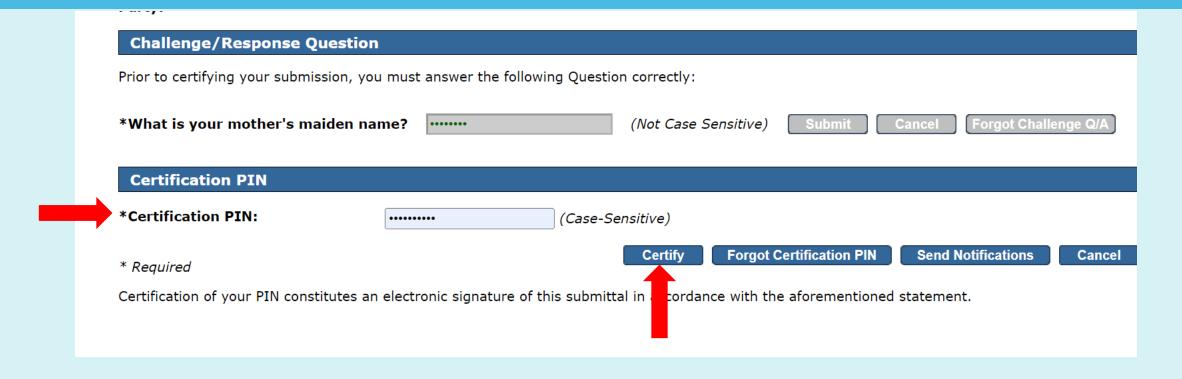
Certification



Prior to certifying your	submission, you must ansv	wer the following Questio	n correctly:	
*What is your all-tim Forgot Challenge Q/A Certification PIN	e favorite sports team?	•••••	(Not Case Sensitive)	Submit Cancel
*Certification PIN:		(Case-Se	ensitive)	
* Required			Certify Forgot Certific	cation PIN Send Notifications

Certification Continued





Summary



My Workspace

User Profile | Certifications | Payments | Documents and Forms |

Permit Folder

Version: 10.1.07

Currently logged in: NICOLE LELIEVRE (NICOLELELIEVRE)

868908

NJDEP TEST FACILITY 1

Help | Logout

Server: Server 1 SUMMARY

Printer Friendly Version

Service Information

Service ID: 1070147

UST Additional Certification Service: UST Additional Service Type:

Certification

Service Name: Renewal/Mod #1070145@868908 (NJDEP TEST FACILITY 1)

Created On: 02/08/2023

Submitted On: 02/08/2023

Facility Profile

Facility ID	Facility Name	County	Facility Location	Mailing Address
868908	NJDEP TEST FACILITY 1	Mercer	401 E State St Trenton, NJ 08608	401 E State St Trenton, NJ 08608

Submission Type Details