Application For Anhydrous Ammonia Storage Facility

The enclosed application and information should be typed or legibly printed in ink and submitted to:

Oklahoma Department of Agriculture, Food and Forestry
Joshua Maples, Fertilizer Program Administrator
PO Box 528804
Oklahoma City, OK 73152-8804
Application for Anhydrous Ammonia Storage Facility

Company Name_________________________________________________________

Mailing Address__________________________________________________________________________

Facility Address__________________________________________________________________________

Legal Description____________________________

Quarter                           Section                 Township                 Range

Application Contact: __________________________________Title_______________________________

Telephone: _________________________________Email: _________________________________________

Please check the appropriate boxes to fully describe the nature of the project.

_____ New Facility Construction       _____ Expansion to Existing Facility       _____ Moving an Existing Facility

Comments: (If additional space is needed, attach a separate sheet.)

**Enclose a copy of the plot plan and an aerial photo map (ASCS Family):

1. **ANHYDROUS AMMONIA.**

   Attach a diagram to include the size, location and a piping scheme (including type of pipe and valves) of each storage container. Include all buildings, houses, petroleum storage located on or adjacent to the property, as well as, distance from property lines, including water sources, etc., within a one (1) mile radius.

   Is the location outside of densely populated areas?   Yes _______   No _______

   Is it more than 50 feet from any property line upon which a building may be erected?

       Yes _______   No _______
Is it more than 600 feet from buildings, structures, or areas used for activities such as civic, political, religious, recreational, or educational purposes, or for involuntary detention of people?

Yes _____  No _____

Is it more than 1500 feet from hospitals, nursing homes, homes for the aged and public swimming facilities?

Yes _____  No _____

Is it more than 50 feet from containers of petroleum products? Yes _____  No _____

Number of nurse tanks at this facility: ___________________________________________________________

Has the city/county government approved the site?  Yes _____  No _____  N/A____

2. Application Certification:

I hereby certify that I am familiar with the contents of this application, the attached schedules, and I am authorized to sign this application in accordance with the Oklahoma Fertilizer Act and Rules. I agree and understand that we are to construct and operate this facility as submitted in this application and conform to all requirements of the Oklahoma Fertilizer Act and Rules.

A determination of compliance by the Department is limited in scope to a review of the information provided by the applicant with respect to applicable laws. The Department assumes no liability for the information provided or review conducted, and a determination of compliances does not warrant that the system or structure is fit for use.

Name__________________________________________  Title __________________________

(Print)

Signature ________________________________________  Date __________________________

Company Name ________________________________________________________________