



**CHESPROCOTT HEALTH DISTRICT**  
 1247 HIGHLAND AVENUE • CHESHIRE • CONNECTICUT  
 PHONE (203) 272-2761 • FAX (203) 250-9412  
[www.chesprocott.org](http://www.chesprocott.org)

**Maura A. Esposito RS, MPH, Director of Health**

**REGISTRATION OF EXISTING  
 UNDERGROUND FUEL OIL TANK (UFOT) FACILITY**

Please fill in registration form completely. Indicate any items for which information is not known as (N/A).

Date \_\_\_\_\_

Residential \_\_\_\_\_ Commercial \_\_\_\_\_ Industrial \_\_\_\_\_

Above Ground Transmission Line Safety Shield \_\_\_\_\_

Year of Installation \_\_\_\_\_ Pressure Tested Yes \_\_\_ No \_\_\_

Owner \_\_\_\_\_ Year Tested \_\_\_\_\_

Address \_\_\_\_\_ Testing Company \_\_\_\_\_

Town \_\_\_\_\_ Address \_\_\_\_\_

Phone \_\_\_\_\_ Phone \_\_\_\_\_

**TYPE of TANK**

Fiberglass (F. R. P.)

- \_\_\_\_\_ Number of Gallons
- \_\_\_\_\_ Years of Guarantee
- \_\_\_\_\_ Contact Plates
- \_\_\_\_\_ Overfill Protection
- \_\_\_\_\_ Safety Shield or Sleeve
- \_\_\_\_\_ Type of Petroleum

Steel

- \_\_\_\_\_ Number of Gallons
- \_\_\_\_\_ Years of Guarantee
- \_\_\_\_\_ Contact Plates
- \_\_\_\_\_ Overfill Protection
- \_\_\_\_\_ Safety Shield or Sleeve
- \_\_\_\_\_ Type of Petroleum
- \_\_\_\_\_ Cathodic Protection &  
Monitoring Device
- \_\_\_\_\_ Protective Coating

Chesprocott Health District Approved \_\_\_\_\_