Storage Tanks E-Permitting User Guide

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Questions? Contact the DEP Division of Storage Tanks at 717-772-5599 for assistance.

Storage Tank Registration Submissions

From the e-permitting Home Page, click on the Storage Tanks module to be taken to the e-permit Dashboard. At the top of the screen, there are two tabs that allow you to perform registration tasks, the **Create Tab** and the **Maintenance Tab**.

Create Tab

The Create Tab allows you to submit registration forms. You can submit a **New Facility Registration**, **Change of Ownership**, or a **Registration Amendment**. To access these registration forms, click on the **Create** tab along the top of your screen, then hover over **Storage Tank Registration** in the drop-down menu. Click on **Amend Existing Facility, Change of Ownership** or **Initial – New Facility**.

	ft Home	e Crea	te 🗕	Admin	Ma	aintenance -	
		Stor	age Ta	ank Registratio	n	C Amend Existing Facility	
-	Dashboard					Change of Ownership	
Ť	Dashbuaru					C Initial - New Facility	
ePerr	nit Dashboa	ard					

Completed (4)

Drafts (1)

Pending (7)

Amend Existing Facility

To amend an existing facility, select the Tank Owner and/or Facility you would like to submit the amendment for and click **Continue**.

Facility Selection		
Purpose of Submittal*	Amend Existing Facility	
Select the Tank Owner*	Select a value	~
Select the facility you would like to alter*	Select a value	~
Continue Back		

You will be taken to the e-permit Authorization Overview screen:

ePermit Authorization Overview

Select the areas below which you would like to amend and click Save.

				II View A	II Modules	
ncluded	Go To			Status	Con	npleted
2	Tank Owner Information			Ø	03/2	5/2022
2	Site Information			A		
2	Facility Information					
5	Responsible Official Contact Information			8		
C	Storage Tank Information			8		
al Attachments(0)						
Date Added	Document Name	Document Type	Description	Edit	Delete	Download
to attachments to	display					
oad New Attachme	ent					

Note: You will notice several different symbols next to the module names, listed under the **Status** column. Modules that have been filled out and passed their Completeness Checks will have a green check mark. A black triangle next to a module means there is information missing that must be entered before the amendment can be submitted. A red X is okay – it appears next to unselected modules.

Select the modules you would like to complete based on the information you are amending according to the following:

Select the Tank Owner Information module if you are:

- Changing the tank owner mailing address
- Changing the tank owner contact information
- Changing the property owner information

Select the Site Information module if you are:

- Changing the site name
- Changing the site address
- Changing the site contact information
- Changing the NAICS information

Select the Facility Information module if you are:

- Changing the facility name
- Changing the facility address
- Changing the facility operator information

Select the Responsible Official Contact Information module if you are:

- Changing the responsible official name and/or contact information
- Changing the invoice contact information

Note – Changing contact information can also be performed through the simpler Maintenance tab, see page 31.

Select the Storage Tank Information module if you are:

- Changing tank status
- Changing tank substance
- Adding a tank
- Removing a tank

Once the modules are selected, you will be able to click on the name of each module to fill out the required information. When you have finished entering and/or editing the information in the module, click **Save** and then **Completeness Check**. Modules must pass the completeness check to **Continue**.

Once all your chosen modules are complete, click **Final Completeness Check** at the bottom of the Overview screen. Once the final completeness check has passed, click **Submit** for the registration to be sent to the Storage Tanks office for processing. Once DEP has reviewed your application you will receive an email with further instructions on what to do next.

Change of Ownership

To Change Ownership, select the New Tank Owner from the drop down menu and enter the facility ID number you took owner ship of. Then select **Load Facility Info**.

Client Selection							
Select the New Tank Owner*	Select a value	~					
Select Facility (Change of Ownership)							
Enter the Facility ID of the facility (XX-XXXXX) you took ownership of*		Load Facility Info					
Continue Back							

Note: if you do not find the correct New Tank Owner listed, you will need to complete e-permitting selfenrollment as the new owner or contact DEP to have the new owner record created and linked to your Greenport profile.

н

Facility info will automatically populate, and you will be asked if the above facility is the correct facility to transfer ownership. Click **yes** if its correct. If its not correct, click **no** and enter the correct facility ID number.

Next, are you taking ownership of all the tanks at this facility. Click yes if its correct and then continue.

Is the above facility the correct facility to transfer ownership?* Yes
Are you taking ownership of all the tanks at this facility?* Yes O No
Continue Back

You will be taken to the e-permit Authorization Overview screen:

There are 5 modules: Tank owner information, site information, facility information, responsible official contact information, and change of ownership information.

				II View Al	I Modules	
Included	Go To			Status	Cor	npleted
1	Tank Owner Information			⊗		
1	Site Information	Site Information				
1	Facility Information	Facility Information				
1	Responsible Official Con	Responsible Official Contact Information				
7	Change of Ownership In	formation		8		
al Attachments(0)						
Date Added	Document Name	Document Type	Description	Edit	Delete	Download
No attachments to		Document type	Description	Luit	Delete	Download

ePermit Authorization Overview

Tank Owner information Module:

Click the blue hyper link to open the tank owner information. This will auto populate with the New Owner Information. Greyed out areas cannot be changed/updated.

Note: You will notice several different symbols next to the module names, listed under the **Status** column. Modules that have been filled out and passed their Completeness Checks will have a green check mark. A black triangle next to a module means there is information missing that must be entered before the Change of Ownership can be submitted. A red X is okay – it appears next to unselected modules; this will change as you click the corresponding blue hyperlinks and enter the required information. Is the Property Owner information the same as the Tank Owner? Click **yes** if that is correct. When you have finished entering and/or editing the information in the module, click **Save** and then **Completeness Check** and then **Continue** if everything is complete for this module.

Modules must pass the completeness check in order to submit the change of ownership form.

If the Property owner and Tank owner info is not the same click **no** and enter the property owner information into required fields.

When you have finished entering and/or editing the information in the module, click **Save** and then **Completeness Check** and then **Continue** if everything is complete for this module. Modules must pass the completeness check in order to submit the change of ownership form.

The completeness check will let you know if you missed something.

Property Ov	wner Information						٦
	Property Owner In Owner?*	formation the same as the	● Yes 🔿 No				
Tank Owner	r Information Attach	iments (0)					
Date	Added	Document Name	Document Type	Description	Edit	Delete	Download
There	e are no items to dis	splay					
CUpload N	New Attachment						
	Save	Completeness Check	Back				Continue →

All the modules will have a section at the bottom where you can upload documents. The only module that has an upload requirement is the last module **Change of Ownership Information**.

Site information Module:

This is site information for the facility location which will automatically populate. You cannot change the greyed-out areas.

Enter site contact required fields.

Site Contact Information	
Site Contact Last Name*	
Site Contact First Name*	
Site Contact Middle Initial	
Site Contact Suffix	
Site Contact Title	
Site Contact Firm	
Mailing Address Line 1*	
Mailing Address Line 2	
City*	State* Pennsylvania
Country	United States
Email	

You will need to select the Site to Tank Owner Relations from the drop-down menu. Then click **Save**, **Completeness Check**, then **Continue** if everything is correct.

itional Site Information		
NAICS	Agent for Owner or Operator	
NAICS Code	Contractor for Owner or Operator	Delete
There are no items to display	Lessee	
CAdd NAICS Code	Lessee/Operator Operator Other	
Site to Tank Owner Relationship*		*

Facility Information Module:

This will also automatically populate with the facility information. There are 2 fields you can update/change and that is "Facility Name" and "Facility Kind". Other fields are greyed out.

If the **Latitude** and **Longitude** does not automatically populate and you are asked to enter this required information this is what you will see:

To find your facility's Latitude and Longitude you can use a GPS device/unit or <u>Google Maps</u>. **Note:** To use <u>Google Maps</u>, type the facility's complete address in the search bar. This will bring up a red pin drop on the map. Right click red pin to obtain the latitude and longitude.

Next, Horizontal Collection Method Code – Select whether you used Google or GPS to determine the latitude and longitude.

Latitude*		Longitude*	
All points should be provided in NAD 83 and reported	ed to at least 4 de	ecimal places, with a maximum of 6.	
Horizontal Collection Method Code*			
Is the Facility Operator the same as the Owner?*	⊖ Yes ⊖		
		GOGLE	
		GPS	
Save Completeness Check	Back		← Previous Continue →

If the Facility Operator is the same as the owner click yes, **Save**, and **Completeness Check**. If everything is complete, click **Continue**.

Is the Facility Operator the same as the Owner?*		
Save Completeness Check	Back	← Previous Continue →

If the facility operator is not the same as the owner click **No** and enter the facility operator information in the required fields. Click **Save** and **Completeness Check**. If everything is complete **Continue** to next page.

Facility Operator First Name*	Middle Initial	Facility Operator Last Name*	
Facility Operator Title			
Telephone #*		Ext.	
Email*			
FAX			

Responsible Official Contact Information Module:

Enter contact information for the Responsible Official. This individual will receive all DEP Storage Tank-related correspondence unless a separate invoice contact is selected.

ePermit Module Detail - Responsible Official Contact Information

esponsible Official Contact Information				Ň
First Name*	Middle Initial		Last Name*	
Title				
Contact Firm				
Street # and Name or P.O. Box*				
Address Line #2				
City*	State*	Pennsylvania	Zip code*	
Country	United States			•
Telephone #			Ext.	
Email*				
FAX				
Should the invoice be sent to the same address as listed above?*	🔾 Yes 🔾 No			

At the bottom of page click **yes** if the invoices should be sent to the same address to what is listed above. Click **Save** and **Completeness Check**. If everything is complete **Continue** to next page.

If answer is **no**, enter the required information for who and where the invoices should be sent to. Click **Save** and **Completeness Check**. If everything is complete, **Continue** to next section.

Should the invoice as listed above?*	e be sent to the same addres:	s ○Yes ⊛ N	0		
First Name*		Middle Initial		Last Name*	
Title					
Contac	t Firm				
Street	# and Name or P.O. Box*				
Addres	ss Line #2				
City*		State*	Pennsylvania	Zip code*	
Countr	у	United	I States		•
Teleph	one #			Ext.	
Email*					
FAX					
Save	Completeness Check	Back			← Previous Continue →

Change of Ownership Information Module:

You will need to upload either the signature page document with previous owners' signature or the deed of transfer/proof of ownership.

Note: Wait until you run the *Completeness Check* before uploading. A specific upload link will be provided.

Enter the date of sale/transfer. The transfer date cannot be in the future.

Is the previous owner's signature available? If **Yes**, click the blue hyperlink **Signature Page Template**. This will open a Word document that you will need to download complete. The *Previous Owners Signature* must be either handwritten or a verified digital signature (e.g. Docusign, Adobe). Once complete, upload to the application.

ange of Ownership Inf	ormation						
Date of sale/transfe	r						
Is the previous owr	ner signature available?*	Yes O No					
Attach the Signatur	re Page.			Signature	Page Template		
ange of Ownership Inf	ormation Attachments (0)						
ange of Ownership Inf	ormation Attachments (0) Document Name	Document Type	Description	Edit	Delete	Download	
	Document Name	Document Type	Description	Edit	Delete	Download	
Date Added	Document Name to display	Document Type	Description	Edit	Delete	Download	
Date Added There are no items	Document Name to display	Document Type	Description	Edit	Delete	Download	

ePermit Module Detail - Change of Ownership Information

If **No**, upload a copy of the deed or other documentation showing the transfer date.

This is the Previous Owners Signature Page:

	Previous_owner_signatur	e_page ~		
				🗟 Accessib
Previous Owner Signature Page				
(CHANGE OF OWNERSHIP	INFORMATION	I	
OWNERSHIP CHANGE TO - Cli	ent information is noted in Tanl	Owner Information	on module.	_
OWNERSHIP CHANGE FROM (previous owner information)			
Name				_
Employer ID# (EIN) or SSN Mailing Address Line 1				
Mailing Address Line 1				
Address Last Line - City		State	ZIP+4	
Previous Facility ID#				
DATE OF SALE/TRANSFER				
				_
SIGNA	TURE & CERTIFICATION O	F PREVIOUS O	WNER	_
Previous owner's signature is no has attached a deed of transf application.	t available. As required, the "new er or other proof of ownership	/"owner ⊡Yes to this	□ No □ N/A	
I have reviewed this form for sub §4903 (relating to false swearing) authority to sign this Section for th	and 18 PA. C.S.A. §4904 (relating	to unsworn falsifica	tion to authorities), that I have the	e
that all information provided in Section 107 th				y
Type or Print Previous Owner Nam	ie			_
				_
Previous Owner Signature	Title		Date	

Once attachment is uploaded to change of ownership module, click **Save** and **Completeness Check**. If everything is complete you will see this page:

Status Type Message Image: Walidated Successfully Image: Walidate Successfully		
Business Rule Validation Business Rule Validation Status Type Message O Validated Successfully Details Validation		
Type Message Validated Successfully		
Validated Successfully Details Validation		
Validated Successfully Details Validation		
Details Validation		
All detail modules are completed		
		Close
	Download All	

Click **Close**, and then click **Back**.

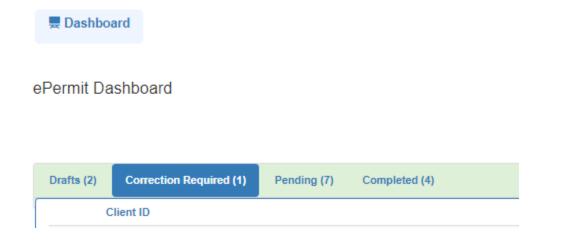
ePermit Authorization Overview

				II View A	ll Modules	
ncluded	Go To			Status	Con	npleted
2	Tank Owner Information			ø	01/2	24/2024
2	Site Information			ø	01/2	24/2024
2	Facility Information			\odot	01/2	24/2024
2	Responsible Official Con	tact Information		ø	01/2	24/2024
2	Change of Ownership In	formation		ø	01/2	24/2024
al Attachments(0)						
Date Added	Document Name	Document Type	Description	Edit	Delete	Download
lo attachments to	display					
oad New Attachm	ont					

Once all your Modules are complete click **Final Completeness Check** at the bottom of the Overview screen. Once the final completeness check has passed, if everything is completed click ok. Once the final completeness check has passed click "**Submit**" for the registration to be sent to the Storage Tanks office for processing. Once DEP has reviewed your application you will receive an email with further instructions or information.

Correction notice:

After DEP reviews your application, if corrections are needed to your application before it can be processed you will receive an email notifying you of this. You will need to log into your Greenport account and from your Dashboard there will be a new **Correction Required** tab. Click the **Correction Required** Tab.



Under **Pending Corrections** click the blue hyper link – **View Document**.

Note: If you need or are requested to you may withdraw your application from this tab as well.

Submission Type	Pending Corrections	,	Last Modified Date	,		Grant Access	Edit	Withdraw	Return to Installer for Correction
Storage Tank Registration	View Document		03/07/2024		ſ	ò	ß	-	

Under Correction Detail will be comments/directions on what you need to do. You can also click **Download Correction Notice** tab if you want to view the entire document.

Correction Notice					
Due Date Correction Type	03/14/2024 Review				
Correction Checklist					
Module/Area			Correction Detail	Corrected	
Change of Ownership Information			Please upload the correct UST Class A/B Operator training certificate.		
				Download Correction Notices	Save Back to Overv
46.01858	ISG PLATE	Storage Tank Registration	03/07/2024	0-	

Before completing the corrections, click/check the box under Corrected then click Save.

Admin Maintenance -					
Correction Notice					
Due Date	03/14/2024				
Correction Type	Review				
Correction Checklist					
Module/Area			Correction Detail	Corrected	
Change of Ownership Information			Please upload the correct UST Class A/B Operator training certificate.		
				Download Correction Notices Save Back to	Overvie
46-01858	ISG PLATE	Storage Tank Registration	View Document 03/07/2024		

The box will automatically close once you save it. You will need to click **View Document** again. The **Module/Area** will have a blue hyperlink below it. You will need to click this to go into the Module/Modules that need to be corrected. Once the changes have been made to the module click **Save** then **Completeness Check**. If all areas are complete click close.

odulo M		ate - 🚨 Admin 🛛 Maintenance -				ę.	User Settings 🛛 🕒	KRGRIES	
Squie v	alidation Messages								
Require	ed Field Validation								
Status	Section Name	Line Item							
Ø	Validated Successfully								
	ss Rule Validation								
Status	Туре	Message							
0	Validated Successfully								
ð	All detail modules are completed								
2		o Information Attachments (1)					Download All	¥	Clos
Ð	Change of Ownership		Document Type	Description	Edit	_		Ť	Clos
		Document Name	Document Type -23 Signature Page	Description signature page	Edit	Delete	Download	Ť	Clo
2	Change of Ownership Date Added 01/24/2024 02:	Document Name 29:07 PM back of invoice_8-4			Edit	_		Ĭ	Clo
	Change of Ownership Date Added	Document Name 29:07 PM back of invoice_8-4				Delete	Download		Clo
9	Change of Ownership Date Added 01/24/2024 02:	Document Name 29 07 PM back of invoice_8-4 hment				Delete	Download		Clos

Then click the back button and you will see this page once all the corrections have been completed. Once all your Modules are complete click **Final Completeness Check** at the bottom of the Overview screen. Once the final completeness check has passed, if everything is completed click ok. Once the final completeness check has passed click **Submit** for the registration to be sent to the Storage Tanks office for processing. Once DEP has reviewed your application you will receive an email with further instructions or information.

Current Vers	sion	Ŧ				E View All Modules				
Included	Go To	Status	Completed	Included	Go To			Status	Completed	
7	Correction Notice	Θ	03/07/2024		Facility Info	rmation		0	03/07/2024	
1	Tank Owner Information	0	03/07/2024		Responsible	e Official Conta	act Information	0	03/07/2024	
9	Site Information	0	03/07/2024		Change of (Ownership Info	rmation	0	03/07/2024	
al Attachmer			Document Type	Descr	iption	Edit	Delete	Dow	nload	
No attachme	nts to display									
load New Att	achment									

ePermit Authorization Overview

New Facility

To register a new facility, select the Tank Owner you would like to submit the registration for and click **Continue.**

pose of Submittal*	Initial - New Facility	
ect the Tank Owner*	Select a value	~
ect the Tank Owner*	Select a value	R

For a new facility, all the modules must be completed. Click on the name of each module to fill out the required information.

				II View All	Modules	
Included	Go To			Status	Con	pleted
4	Tank Owner Information			\odot	02/1	5/2024
v	Site Information			۲		
1	Facility Information			۲		
1	Responsible Official Con	tact Information		8		
7	Storage Tank Information	1		۲		
al Attachments(0)						
Date Added	Document Name	Document Type	Description	Edit	Delete	Download
No attachments to	display					

Note: You will notice several different symbols next to the module names, listed under the **Status** column. Modules that have been filled out and passed their Completeness Checks will have a green check mark. A black triangle next to a module means there is information missing that must be entered before the Change of Ownership can be submitted. A red X is okay – it appears next to unselected modules; this will change as you click the corresponding blue hyperlinks and enter the required information.

Tank Owner Information module:

Tank owner information will automatically populate. Greyed out areas cannot be changed. Enter the required information.

Is the Property Owner Information the same as the Tank Owner? If **Yes**, click **Save**, then **Completeness Check**, and if everything is correct click **Continue**.

Pro	perty Owner Information	on						-
	Is the Property Own Tank Owner?*	er Information the same as the	⊛ Yes ○ No					
Tan	k Owner Information A	Attachments (0)						•
	Date Added	Document Name	Document Type	Description	Edit	Delete	Download	
	There are no items	to display						
Ø	Upload New Attachme	nt						
_								

If No, enter the required information, then click Save, Completeness Check and if everything is correct click Continue.

Is the Property Owner Information the same as the Tank Owner?*	○ Yes ● No
Property Owner Last Name*	
Property Owner First Name*	
Property Owner Middle Initial	
Property Owner Suffix	
Property Owner Title	
Property Owner Firm	
Mailing Address Line 1*	
Mailing Address Line 2	
City*	State* Pennsylvania
Country	United States

Site Information module:

Enter Site Name and site address.

Site Information		~
DEP Site ID	Pending	
Site Name*		
EPA ID		
Estimated Number of Employees at Present Site		
Description of Site		
Site Location*		
Primary ↓ County(ies)	Municipality(ies)	Delete
There are no items to display		
CAdd Location		
Site Address Line 1*		
Site Address Line 2		
City*	State* Pennsylvania *	Zip Code*
Detailed written directions to Site		

Enter the site contact information

Site Contact Information	
Site Contact Last Name*	
Site Contact First Name*	
Site Contact Middle Initial	
Site Contact Suffix	
Site Contact Title	
Site Contact Firm	
Mailing Address Line 1*	
Mailing Address Line 2	
City*	State* Pennsylvania * Zip code*
Country	United States
Email	

Select from the drop-down menu the Site to Tank Owner Relationship

dditional Site Information			
NAICS			
NAICS Code	Priority	Delete	
There are no items to display			
CAdd NAICS Code			
Site to Tank Owner Relationship			
	Agent for Owner or Operator	Â	
Save Completeness	Contractor for Owner or Operator Ch Lessee		← Previous Continue →
	Lessee/Operator		
	Operator		
	Other		

Click Save, Completeness Check and if everything is correct click Continue.

Facility Information module:

Enter the required information. To find your facility's Latitude and Longitude you can use a GPS device/unit or <u>Google Maps</u>.

Note: To use <u>Google Maps</u>, type the facility's complete address in the search bar. This will bring up a red pin drop on the map. Right click red pin to obtain the latitude and longitude.

Next, Horizontal Collection Method Code – Select whether you used Google or GPS to determine the latitude and longitude.

Is the Facility Operator the same as the Owner? If **Yes**, click **Save**, then **Completeness Check**, and if everything is correct click **Continue**.

Facility Information						-
Facility ID		Pending				
Facility Name*						
Facility Kind*						•
Facility Address Li	ine 1*					
Facility Address Li	ine 2					
City*		State*	Pennsylvania 👻	Zip code*		
Latitude*			Longitude*			
All points should be provided	in NAD 83 and reported t	to at least 4 decima	I places, with a maximum of 6.			
Horizontal Collection Method	Code*					•
Is the Facility Operator the sa	me as the Owner?*	○ Yes ○ No				
Save	mpleteness Check	Back			+ Previous	Continue ->

If No, enter the required information, then click Save, Completeness Check and if everything is correct click Continue.

Is the Facility Operator Facility Operator First Name*	r the same as the Owner?*	○ Yes ● No Middle Initial	Facility Operator Last Name*	
Facility Op	erator Title			
Telephone	#*		Ext.	
Email*				
FAX				
Save	Completeness Check	Back		← Previous Continue →

Responsible Official Contact Information module:

Enter the required information.

Should the Invoice be sent to the same address as listed above? If **Yes**, click **Save**, then **Completeness Check**, and if everything is correct click **Continue**.

Responsible Official Contact Information				▼
First Name*	Middle Initial		Last Name*	
Title				
Contact Firm				
Street # and Name or P.O. Box*				
Address Line #2				
City*	State*	Pennsylvania	Zip code*	
Country	United States			¥
Telephone #			Ext.	
Email*				
FAX				
Should the invoice be sent to the same address as listed above?*	🔿 Yes 🔿 No			
Save Completeness Check	Back			← Previous Continue →

If No, enter the required information, then click Save, Completeness Check and if everything is correct click Continue.

Tit	tle							
	ontact Firm	ime or P.O. Box*						
	ddress Line #							
Cit	ty*		State*		Pennsylvania	•	Zip code*	
Co	ountry			United St	tates			•
Те	elephone #						Ext.	
En	nail*							
FA	x							

Storage Tank Information module:

If you have an above ground Storage tank click **Add Aboveground Tank blue link**.

round 1													
Tank #	Previous Status	New Status	Туре	install Date	Change of Status Date	Capacity (Gallons)	Substance	CERCLA Name	CAS#	Exempt Reference Code	Change initiated by	Edit	Delete
There	are no items	to display											
Add Ab	ooveground T	änk											
Add Ab		ank											
ound T		New Status		Install Date	Change of Status Date	Capacity (Gallons)	Substance	CERCLA	CAS#	Exempt Reference	Change		

Note: Each tank will have to be added separately.

This will bring you a drop-down menu for New Status of tank. Select the appropriate status. If tank is in C or T status you will need to enter tank detail.

Add New Abovegr	Home Create → , round Tank	Admin Maintenance	▼	×
W New Status*			A	
			C - Currently in Use	
		1	P - Permanently Closed	el
Storage	Tank Information		R - Removed	
	und Tealer		T - Temporarily Out of Service	
Abovegro	ound Tanks			

Enter the tank details:

ank Details			-
Tank #	0	01A	
Previous Status		/a	
		- Currently in Use	
New Status*			
Туре		boveground Storage Tank	
Construction Type*			· ·
Install Date*			
Capacity (gallons)*			
Substance			•
Substance Begin Date			
Flammable & Combustible Liquid Permit # (if applicable)			
Tank Construction & Corrosion Protection			*
Tank Manufacturer			Ŧ
Tank Model			
Aboveground Piping Construction & Corrosic	on Prote	action	
Select One or More			
Carbon Steel			
Cathodically Protected Metallic			
Copper			
Single Wall Fiberglass			
Single Wall Flexible (Non-Metallic)			
PVC			
None			
Double Wall - Metallic Primary			
Double Wall - Rigid (FRP) Primary			
Double Wall - Flexible Primary			
Stainless Steel			
Other			
Piping Manufacturer			
Piping Model			
Product Delivery System			_
Select One or More Suction: Check valve at pump			
Suction: Check valve at pump Suction: Check valve at tank			
Pressure			
Gravity Fed			
None			
Spill Prevention		•	
Overfill Prevention Select One or More			
Overfill Alarm			
Fill In Less Than 25 Gallons (Exempt)			
Drop Tube Shutoff Device			
None			
Yes			
Emergency Containment		*	
Secondary Containment		*	
Stage 1 Vapor Recovery		•]	
Tank Supplies Emergency Generator		Ψ.	

Once finished entering information click **Save**, then **Completeness Check**, and if everything is correct click **Continue**.

If you have an **Underground storage tank**, click the **Add Underground Tank** blue link

Status Status Type Date Status Date (Gallons)		Name	CAS#	Code	Change initiated by	Edit	Delete
	oubstance	Name	CAS#	Code	initiated by	Edit	Del
are no items to display							

Select the Underground tank status from the drop-down menu then click Save. If tank is in C or T status you will need to enter tank details.

Add New Unde	ergroun	d Tank		 Wallitena						n oser seunds	3	×
New Status	k.										 •	
					ently in Use nanently Closed oved						el	
	Tank #	Previous Status	New Status		oorarily Out of S e (Gallons)	ervice Substance Nam	ne C,	AS# Code	initiated by	Edit Delete		

Tank Details	▼
Tank #	001
Previous Status	n/a
New Status*	C - Currently in Use
Туре	Underground Storage Tank
Construction Type*	•
Install Date*	
Capacity (gallons)*	
Substance	
Substance Begin Date	
Flammable & Combustible Liquid Permit # (if	
applicable)	
Tank Construction & Corrosion Protection	•
Tank Manufacturer	•
Tank Model	
Underground Piping Construction - Single/Inner Wall	•
Single/Inner Wall Piping Model	
Underground Piping Construction - Outer Wall	•
Outer Wall Piping Manufacturer	•
Outer Wall Piping Model	
Product Delivery System	
Select One or More	
Suction: Check valve at pump	
Suction: Check valve at tank	
Pressure	
Gravity Fed	
□ None	
Spill Prevention	•
Overfill Prevention	
Overfill Alarm	
Fill In Less Than 25 Gallons (Exempt)	
□ None	
Drop Tube Shutoff Device	
Stage 1 Vapor Recovery	

	Tank-top Containment Piping Only)	Sumps Present (Product						•
	Under-dispenser Cont	ainment Present						•
	Line Leak Detector Sh	uts Off Pump						•
	Tank Supplies Emerge	ncy Generator						•
Unc	lerground Tank Details At	tachments (0)						•
Unc	lerground Tank Details At Date Added	tachments (0) Document Name	Document Type	Description	Edit	Delete	Download	-
Unc		Document Name	Document Type	Description	Edit	Delete	Download	-
	Date Added	Document Name	Document Type	Description	Edit	Delete	Download	-

Once finished entering information click **Save**, then **Completeness Check**, and if everything is correct click **Continue**.

If you have an underground storage tank in C Status you will need to enter the UST Class A, B, C Operator Information.

Are the Class A and Class B Operator the Same? If yes nothing else is needed here. If no, you will need to enter the Class B Operator Information.

Class A Operator First Name			Middle Initial			Last Name			
Street # and Name or F	P.O. Box*								
Address Line #2									
City*			State	Pennsylvania	•	Zip code*			
Country			United States						
Telephone #				Ext.					
Email									
Are the Class A and Cl	lass B Operator the s	same?*							
f an underground tanl	k is changed to C sta	atus the Clas	51						
Class C Operators*			No						
			Yes						
First Name*	Last Name*	Training	g Provided By*	Training Date	e (most red	cent)*	Edit	Delete	
There are no items	s to display								

To enter Class C Operator, click on the Add Class C Operator blue hyper link to add the information

The Installer/Remover and/or Inspector Certification document must be attached/uploaded.

First, run the **Completeness Check** and the application will provide upload links for this document and the UST Class A and B Operator training certificates if required.

		INS.	TALLER / RE	MOVER CEI	RTIFICATION		
						alfrom service of the abovegroun	dandundergrour
-	nk systems listed in Sectio		-	be submitted or	n a "Tank Modifica	ition Report" form.	
	RE & CERTIFICATION OF						
						ertify that all tank handling activiti n Act of 1989 and all applicable	
ertify, un	der penalty of law as provid	ed in 18 PA C.S.A.				hat the information provided there	
ind comp	lete to the best of my know	ledge and belief.					
	Installer/Remover	Construction	Individual	Certification	Company	Installer/Remover	
Tank#	Name	Standard	Certification#	Category	Certification#	Signature	Date
							_
			INSPECTO	RCERTIFIC			
'his sectio	on must be completed by th	e DEP Certified Ta				nstallation standards for field con	structed tanks ar
ibovegroi	und tanks greater than 21,0)00 gallons listed i	ank Inspector(s) w n Section VI. (Typ	ho is responsible le or Print legibl	e for verifying the in y) A DEP Certifie	nstallation standards for field con d Inspector may also be respons	
ibovegroi		000 gallons listed i ulated service for	ank Inspector(s) w n Section VI. (Typ the first time with	ho is responsible be or Print legibly no tank handling	e for verifying the in y) A DEP Certifie activities.		
bovegrou xisting A	und tanks greater than 21,0 STs which are entering reg	000 gallons listed i ulated service for SIG	ank Inspector(s) w n Section VI. (Typ the first time with SNATURE & CER	ho is responsible be or Print legibly no tank handling TIFICATION OF	e for verifying the in y) A DEP Certifie activities. IN SPECTOR(S)	d Inspector may also be respons	sible for inspectin
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bovegrou existing A s the cer oppropriat he tank(s) of 1989, a	Ind tanks greater than 21,0 STs which are entering reg tified tank inspector respon e industry standards and, it meet or exceed applicable nd all applicable regulation	000 gallons listed i ulated service for SIG sible for verifyingta applicable, to ma e design and opera is. I also certify uni	ank Inspector(s) w n Section VI. (Typ the first time with SNATURE & CER ank handling activi nufacturer's specii tting standards; an der penalty of law	ho is responsible of or Print legibly to tank handling TIFICATION OF ties and construct ications; that the d are in complian as provided in 18	e forverifying the in y) A DEP Certifie activities. IN SPECTOR(S) tion standards, I c tank(s) have beer oce with the require 3 PA C.S.A. 4904	d Inspector may also be respons ertify that the tank(s) listed below	sible for inspection are constructed tandards; and the pill Prevention A
bovegrou xisting A s the cer ppropriat ne tank(s) f 1989, a	Ind tanks greater than 21,0 STs which are entering reg tified tank inspector respon e industry standards and, if meet or exceed applicable	000 gallons listed i ulated service for SIG sible for verifyingta applicable, to ma e design and opera is. I also certify uni	ank Inspector(s) w n Section VI. (Typ the first time with SNATURE & CER ank handling activi nufacturer's specii tting standards; an der penalty of law	ho is responsible of or Print legibly to tank handling TIFICATION OF ties and construct ications; that the d are in complian as provided in 18	e forverifying the in y) A DEP Certifie activities. IN SPECTOR(S) tion standards, I c tank(s) have beer oce with the require 3 PA C.S.A. 4904	d Inspector may also be respons ertify that the tank(s) listed below I tested as required by industry s ements of the Storage Tank and S	sible for inspection are constructed tandards; and the pill Prevention A
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bovegrou xisting A s the cen ppropriat he tank(s) f 1989, a he inform	ind tanks greater than 21,0 STs which are entering reg tified tank inspector respon te industry standards and, if meet or exceed applicable nd all applicable regulation ation provided herein is tru	000 gallons listed i ulated service for sible for verifyingta f applicable, to ma e design and opera is. I also certify um- ie, accurate and co Construction	ank Inspector(s) w n Section VI. (Typ the first time with i sNATURE & CER ank handling activi nufacture's speci titing standards; an der penalty of law omplete to the bese Individual	ho is responsible be or Print legibl ho tank handling TIFICATION OF ties and construct ications; that the d are in complian as provided in 18 t of my knowled Certification	of or verifying the in y) A DEP Certifie activities. IN SPECTOR(S) dion standards, I ci tank(s) have beer ce with the require B PA C.S.A. 4904 ge and belief. Company	d Inspector may also be respons ertify that the tank(s) listed below In tested as required by industry s ments of the Storage Tank and S (relating to unsworn falsification)	sible for inspection are constructed tandards; and th pill Prevention A to authorities), th
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bovegrou xisting A s the cen ppropriat he tank(s) f 1989, a he inform	ind tanks greater than 21,0 STs which are entering reg tified tank inspector respon te industry standards and, if meet or exceed applicable nd all applicable regulation ation provided herein is tru	000 gallons listed i ulated service for sible for verifyingta f applicable, to ma e design and opera is. I also certify um- ie, accurate and co Construction	ank Inspector(s) w n Section VI. (Typ the first time with i sNATURE & CER ank handling activi nufacture's speci titing standards; an der penalty of law omplete to the bese Individual	ho is responsible be or Print legibl ho tank handling TIFICATION OF ties and construct ications; that the d are in complian as provided in 18 t of my knowled Certification	of or verifying the in y) A DEP Certifie activities. IN SPECTOR(S) dion standards, I ci tank(s) have beer ce with the require B PA C.S.A. 4904 ge and belief. Company	d Inspector may also be respons ertify that the tank(s) listed below In tested as required by industry s ments of the Storage Tank and S (relating to unsworn falsification)	sible for inspection are constructed tandards; and th pill Prevention A to authorities), th

Installer/Remover and Ins	spector Information						-
	ver and/or Inspector Certificat right. Upload below.	on document must be attached.	A template may be	Installer/Re	mover Certificat	ion Template	
Storage Tank Information	Attachments (0)						-
Date Added	Document Name	Document Type	Description	Edit	Delete	Download	
There are no items	to display						
CUpload New Attachme	nt						
Save	Completeness Check	Back				- Previo	us

Once finished entering information click **Save**, then **Completeness Check**, and if everything is correct click **Continue.**

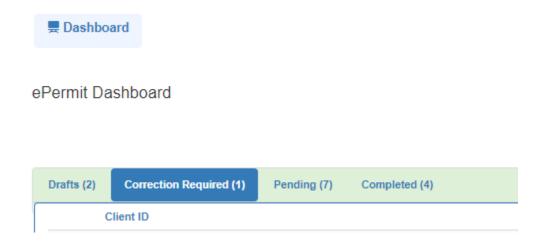
When they have all been completed, click **Final Completeness Check** at the bottom of the Overview screen. Once the final completeness check has passed (Status is all green check marks), click **Submit** for the registration to be sent to the Storage Tanks office for processing. Once DEP has reviewed your application you will receive an email with further instructions or information.

ePermit Authorization Overview

				Uiew Al	ll Modules	
ncluded	Go To			Status	Con	pleted
9	Tank Owner Information			8		
9	Site Information			8		
9	Facility Information		8			
9	Responsible Official Con	tact Information	8			
2	Storage Tank Information			8		
al Attachments(0)						
ate Added	Document Name	Document Type	Description	Edit	Delete	Download
lo attachments to	display					
oad New Attachme	ent					

Correction Notice:

After DEP reviews your application, if corrections are needed to your application before it can be processed you will receive an email notifying you of this. You will need to log into your Greenport account and from your Dashboard there will be a new **Correction Required** tab. Click the **Correction Required** Tab.



Under **Pending Corrections** click the blue hyper link – **View Document**.

Note: If you need or are requested to you may withdraw your application from this tab as well.

Submission Type	Pending Corrections	Last Modified Date	Grant Access	Edit	Withdraw	Installer for Correction
Storage Tank Registration	View Document	03/07/2024	6	ß	+	

Under Correction Detail will be comments/directions on what you need to do. You can also click **Download Correction Notice** tab if you want to view the entire document.

Admin Maintenance -					
Correction Notice					
Due Date	03/14/2024				
Correction Type	Review				
Correction Checklist					
Module/Area			Correction Detail	Corrected	
Change of Ownership Information			Please upload the correct UST Class A/B Operator training certificate.		
·					
				Download Correction Notices	Save Back to Overview
46,01858	ISG PLATE	Storage Tank Registration	03/07/2024	2	

Before completing the corrections, click/check the box under Corrected then click Save.

Admin Maintenance -					4
Correction Notice					×
Due Date	03/14/2024				
Correction Type	Review				
Correction Checklist					
Module/Area			Correction Detail	Corrected	
Change of Ownership Information			Please upload the correct UST Class A/B Operator training certificate.		
				Download Correction Notices Save	Back to Overview
46-01858	ISG PLATE	Storage Tank Registration	View Document 03/07/2024	6	

The box will automatically close once you save it. You will need to click **View Document** again. The **Module/Area** will have a blue hyperlink below it. You will need to click this to go into the Module/Modules that need to be corrected. Once the changes have been made to the module click **Save** then **Completeness Check**. If all areas are complete click close.

Module V	alidation Me	Home Create - AA	omin Maintenance -				· · · ·	User Settings L+ KI	KORIES	×
Require	ed Field Vali	dation								
Status	Section Nar	ne Li	ine Item							
0	Validated Su	ccessfully								
Busine	ss Rule Vali	dation								
Status	Туре	м	essage							
Θ	Validated Su	ccessfully								
Details	Validation									
0	All detail mod	lules are completed								
										Close
		Change of Ownership Information A	Attachments (1)					Download All	~	
		Date Added	Document Name	Document Type	Description	Edit	Delete	Download		
		01/24/2024 02:29:07 PM	back of invoice_8-4-23	Signature Page	signature page	G		۲		
		Cupload New Attachment								
		Save	ompleteness Check Back							

Then click the back button and you will see this page once all the corrections have been completed. Once all your Modules are complete click **Final Completeness Check** at the bottom of the Overview screen. Once the final completeness check has passed, if everything is completed click ok. Once the final completeness check has passed click **Submit** for the registration to be sent to the Storage Tanks office for processing. Once DEP has reviewed your application you will receive an email with further instructions or information.

Current Vers	sion	Ŧ				II View A	II Modules		
Included	Go To	Status	Completed	Included	Go To			Status	Completed
v	Correction Notice	Ø	03/07/2024		Facility Info	ormation		0	03/07/2024
1	Tank Owner Information	0	03/07/2024		Responsib	le Official Conta	ct Information	0	03/07/2024
~	Site Information	0	03/07/2024		Change of	Ownership Info	rmation	0	03/07/2024
al Attachmen	nts(0)								
Date Added	Document Name		Document Type	Descr	iption	Edit	Delete	Dow	nload
No attachme	nts to display								

ePermit Authorization Overview

Maintenance Tab

The Maintenance Tab allows you to perform either a **Facility Information** update or a **Facility Contacts Mass Update**. Click on the **Maintenance** tab along the top of your screen, then hover over **Facility** in the drop-down menu. Click on either **Facility Information** or **Facility Contacts Mass Update**.

A Home	Create -	👤 Admin	Maintenance -		
🗮 Dashboard			Facility	Facility Information Facility Contacts Mass Update	
ePermit Dashboard					

Note: the changes made under the Maintenance Tab will be instant, and do not go through the Storage Tanks office for approval.

Facility Information

There are several types of facility information you can update through this tab: Responsible Official, Invoice Contact, UST Class A Operator, and UST Class B Operator.

Clicking on the **Facility Information** button will display a list of all Client IDs and Facilities you manage. If the facilities are not listed, click the **blue plus sign (+)** to the left of the Client ID to show them.

Client ID	Client Name	
99999	CLIENT NAME	

CILL AND		Clinet North				
Client ID		Client Name	1			
99999		CLIENT NAM	1E			
Facility Id	Facility Name	Address	City	State	Zip Code	
<mark>99-99998</mark>	FACILITY NAME	ADDRESS	CITY	PA	ZIP CODE	View
99-99999	FACILITY NAME	ADDRESS	CITY	PA	ZIP CODE	View

Find the facility whose information you wish to update and click the **View** button to the right of the zip code.

This will open the Facility Maintenance dashboard. There are tabs along the top that give you access to all of the above-listed information, as well as a change log summary that shows the history of changes made to the facility information.

Facility Maintenance	1					
Facility Information	Responsible Official	Invoice Contact	Class A Operator	Class B Operator	Change Log Summary	
Facility ID						
Facility Name*						
Facility Kind*			•			
Facility Address Line 1*						
Facility Address Line 2						
City*		State*				
Latitude*			Longitude*			
All points should be prov	vided in NAD 83 and must b	be reported to 4 decim	al places			
Horizontal Collection Method Code*			w.			
Is the Facility Operator t	he same as the Owner?* @	Yes 🔿 No				
Save						

Once you have made all the changes you need, click **save**.

Facility Contacts Mass Update

The Facility Contacts Mass Update tab allows you to change the facility contact information for multiple facilities at a time.

Clicking on the **Facility Contacts Mass Update** button will display a list of all Client IDs and Facilities you manage. If the facilities are not listed, click the **blue plus sign (+)** to the left of the Client ID to show them.

Facility Inform	nation		
	Client ID	Client Name	
•	99999	CLIENT NAME	

Find the facilities whose contact information you would like to update and click the box to the left of the Facility ID. You may choose multiple facilities, but make sure that every facility you choose will be using the same information as what you will provide.

What fac	ity(ies) should be updated?					
	Client ID	Client	Name			
	99999	CLIEN	NAME			
Faci	lity Id Facility Name	Address	City	State	Zip Code	
1 99-9	9997 FACILITY NAME	ADDRESS	CITY	PA	ZIP CODE	
99-9	9998 FACILITY NAME	ADDRESS	CITY	PA	ZIP CODE	
99-9	9999 FACILITY NAME	ADDRESS	CITY	PA	ZIP CODE	

Once you have chosen all the facilities whose information you are updating, scroll down to the box for Step 2. This box will ask you if there is a facility you would like to copy from. If yes, choose that facility from the dropdown menu that appears.

Is there a facility you would like to copy from?	® Yes ○ No	
Select the Facility to copy from.	Select a value	
Step 3. What contact information would you like to update?	Select a value	
Select a contact type below to update. You can select one types if needed.	99-99995 - FACILITY NAME - CITY, County	
Information to Update	99-99996 - FACILITY NAME - CITY, County	
	99-99997 - FACILITY NAME - CITY, County	
Step 4. Confirm Update	99-99998 - FACILITY NAME - CITY, County	
Apply Update	99-99999 - FACILITY NAME - CITY, County	

The next box, Step 3, asks what contact information you are updating. You can only update one type of information at a time, though you are able to perform multiple updates in a row for the same set of facilities without having to re-select them.

Select a contact type below to update. You ca types if needed.	in select one type of contact to update at time. The ab	above facility(ies) will remain selected so you can quickly update addition	nal conta
Information to Update	Select a value		
Step 4. Confirm Update	Select a value		
Apply Update	Invoice Contact		
	Responsible Official		
	Class A Operator		
	Class A Operator Class B Operator		

Once you have selected a module, the box will expand to show the fields you can update. Enter the appropriate information and click "**apply update**" in the Step 4 box.