PURPOSE

To provide a detailed step-by-step guide to the customer for the process for a Storage Tank-Install application in the Planning and Land Use System. This application is used when installing a new, permanent storage tank; installing a portable, temporary storage tank; relocating an existing tank, modifying existing tank lines or dispensing equipment; or making a tank change to contain higher hazard contents.

Storage Tank Customer Application Process

Intake in Accela Citizen Access (ACA)

1. Login to **PLUS**
2. Click Fire module tab
3. Click **Create an Application.**
4. Check the box to indicate you have read and accepted the terms, then click **Continue Application**

5. Expand the dropdown menu **Installation**, then select the option for Storage Tank - Install and click **Continue Application**

6. Fill out Step 1: Location and People>Location Information

    a. Enter the **Project Address**
       (Enter street number and first
       3 letters of street name
       and select search)
       OR

b. Enter **Location Details**

c. Answer if there are **multiple addresses.**

d. **Tenant Location Details** can be provided.
e. Click **Continue Application.**

7. Fill out Step 1: Location and People>Contact Information; click Continue Application **– You must have a customer account, always use "Select from Account", do not select new:**
    a. Enter at least one **Applicant**
    b. Enter at least one **Billing Contact**
    c. Enter at least one **Property Owner - Click "Select from Account and choose "Owner"**
    d. **Tenant** is optional
    e. Click **Continue Application.**

8. Fill out Step 1: Location and People>Contractor Information
    a. "Are you acting as your own contractor?" No by default.
        i.   If you answer Y, field in 8b will disappear. Skip to step 10.
        ii. If you answer N, populate 8b.
    b. "Will the Contractor be selected later?" Required.
        i.   If you answer Y, Licensed Professional in 9b will not be required.
        ii. If you answer N, continue to step 9 and populate all sections.
    c. Click **Continue Application.**

9. Fill out Step 2: License Information>License Information
    a. Enter **License Professional Validation Information**

    b. Enter **Licensed Professional** using Look Up button.

i. Enter the "State License Number." Click **Save and Close**.

Licensed Professional Information   ✕

Enter the License Type and the State License Number. The remaining fields will be populated if the license information is validated. Click Save and Close if the displayed data is correct. If the displayed data is not correct, click Clear and try another license.

*License Type   *State License Number

[Contractor ▼]   [   ]

Business Name / First Name / Last Name

[   ]

Address

[   ]

City   Zip Code

[   ] [   ]

Country/Region

[United States   ▼]

Phone   Email

[   ] [   ]

[**Save and Close**] [Clear] Discard Changes

c. Enter **Business, Professional and Occupational License (BPOL) Details.**
    i. "Do you have a Fairfax County Business License?" Required
        1. If you answer Y, 9cii and 9ciii will disappear. Skip to 9civ.
        2. If you answer N, proceed to 9cii.
    ii. "Do you have a Temporary BPOL License?" Required.
        1. If you answer Y, proceed to 9ciii.
        2. If you answer N, skip to step 10.
    iii. "Please provide the Issue Date for the Temporary BPOL License." Required.

Business, Professional and Occupational License (BPOL) Details

This section will validate your business license against information held by the County of Fairfax. If you are licensed by a jurisdiction outside of the County of Fairfax, it is likely your license details will not be found. In that instance, please enter your account number and continue with your application.

Account Number is a 9 digit number without spaces, letters or dashes. For example: 000142810

*Do you have a Fairfax County Business License?:   ○ Yes ○ No

Do you have a Temporary BPOL License?:   ○ Yes ○ No

Please provide the Issue Date for the Temporary BPOL License: [MM/DD/YYYY] 📅

    iv. "Account Number." Required.

v. "BPOL License Status." Auto-generated (slowly).

Business, Professional and Occupational License (BPOL) Details

This section will validate your business license against information held by the County of Fairfax. If you are licensed by a jurisdiction outside of the County of Fairfax, it is likely your license details will not be found. In that instance, please enter your account number and continue with your application.

Account Number is a 9 digit number without spaces, letters or dashes. For example: 000142810

*Do you have a Fairfax County Business License?:   ⦿ Yes ○ No

Account Number: *   [   ]

BPOL License Status: [--Select--   ▼]

d. Click **Continue Application.**

10. Fill out Step 2: License Information>BPOL Exemption
   a. Enter **Business, Professional and Occupational License Exemption**.
      i. Five fields appear required but only four must be populated. "Contractor" or "Agent" checkbox is required.
   b. Click **Continue Application.**

Business, Professional and Occupational License Exemption

I certify that in accordance with Section 4-7.2-3(G) of the Fairfax County Code, a contractor or business owner listed on this permit application is exempt from current business license tax based on the prior year gross receipts attributed to their business.

Click here if BPOL exemption is appropriate. You will be asked to certify the exemption: *

Name: *

Contractor: *

Agent: *

Certification Date: *

MM/DD/YYYY

11. Fill out Step 2: Application Detail>Application Information

a. Enter the **Project Scope.**

Project Scope

This will describe the project, to include the name, dates, and any other pertinent information. It may be updated by county staff to include all necessary details.

* Project Name:

* Project Description:

   b. Enter the **Project Details**.
      i. If a field was previously answered in the application process and it appears here again, it will be auto-populated with the previous answer and cannot be overwritten.

Project Details

* Is there a Building Parent or Related Permit?:   ○ Yes ○ No

* Is there a Code Modification requested or approved for this permit?:   ○ Yes ○ No

* Estimated Cost: 45100

c. Enter the **Fire Marshal Review Details**.

Fire Marshal Review Details

* Installation Type: --Select-- ▼

Are there any other storage tanks existing on the property?:   ○ Yes ○ No

* Code Edition: --Select-- ▼

   i. Expressions will expand some fields based on the answers.

Fire Marshal Review Details

* Installation Type: Installation of a new, per ▼

Are there any other storage tanks existing on the property?:   ◉ Yes ○ No

* Code Edition: Other   ▼

Other Code Edition: *   [   ]

   Display for all Installation Types

d. Click **Continue Application**
e. **Parent and Related Records Entry** page is required if visible because any of the following questions were answered as Y earlier in the application. Click **Add a Row** to populate, then **Submit**. Click **Continue Application** after population.
   i. "Is there a Building Parent or Related Permit?"
   ii. "Is there a Code Modification requested or approved for this permit?"

PARENT AND RELATED RECORDS
Provide the Building parent record and any related Building and/or Fire records to your project.

* Record/Permit Type: Record ID:
   --Select--   ▼   [   ]

f. **Tank Information** page is required for all applications. Click **Add a Row** to populate, then **Submit**. Click **Continue Application** after population.

TANK INFORMATION

List the tank information below as it pertains to the project scope. Multiple, permanent tanks can be requested under one permit for the same address. Portable/Temporary tanks require a separate permit.

*Primary Tank Purpose:	Other purpose:	*Quantity:
--Select-- ▼		

*Capacity (gal):	*Content:	Description, if Other:
	--Select-- ▼	

*Placement:	Location:	*Installation Type:
--Select-- ▼	--Select-- ▼	--Select-- ▼

Classification of Liquids:	*Tank Material:	Material Description, if Other:
--Select-- ▼	--Select-- ▼	

*Style:	*UL Rating:	Other UL Rating:
--Select-- ▼	--Select-- ▼	

*Line Test Method:	Type of Tank:	
--Select-- ▼	--Select-- ▼	

g. **Existing Storage Tanks** page is required if because "Are there any other storage tanks existing on the property?" was answered as Yes earlier in the application. Click **Add a Row** to populate, then **Submit**. Click **Continue Application** after population.

EXISTING STORAGE TANKS

*Quantity:	*Capacity (gal):	*Content:
		--Select-- ▼

Description, if Other:	*Placement:	Location:
	--Select-- ▼	

Classification of Liquids:		
--Select-- ▼		

12. On Step 4: Review, review the application details, then click **Continue Application.**

13. A confirmation screen will verify that your application was submitted, and a record number will be displayed. Storage Tank – Install records may have a "mask" applied to the record to identify the review type more easily by the name alone.

Confirmation

✓ Thank you for using our online services for your submission. A confirmation email will follow.

FTNKI-2022-00079   **Upload Plans and Documents**   Copy Record

Review Type	RULES
Fire	
	FTNKI (ASI Installation Type =
	Installation of a new, permanent storage tank
	Installation of a portable/temporary storage tank
	Relocation
	Modification to existing tank lines or dispensing equipment
Storage Tank - Install	Tank change to higher hazard
Storage Tank - Install w/LP	FTNKI-LP - (ASIT Tank Information, ASI Content = LPG - Propane)

Review Type and mask rules for Sprinkler System and Standpipe System records.

14. A "Received" notification will be sent to all contacts on the record.

Dear

Your Storage Tank - Install,   :, has been received.

Please visit the Citizen Portal to upload plans and supporting documents. The application will not be reviewed until plans and supporting documents have been submitted.

Please visit the PLUS Support for step-by-step instruction on completing your submission.

If you have any questions, please call the Revenue & Records Branch at 703-246-4803 between the hours of 7:30 a.m. and 3:30 p.m. Monday - Friday with the exception of all County observed holidays. If you prefer, you can email us at fire.revenuepermits@fairfaxcounty.gov.

Thank you,

Revenue & Records Branch
703-246-4803
7:30 am - 3:30 pm
fire.revenuepermits@fairfaxcounty.gov
Office of the Fire Marshal

15. Click **Upload Plans and Documents** to open the Digital Plan Room.
16. Fill out Step 1: Information/Information
    a. Enter **General**. Optional. Required documents will be displayed. (These vary based on intake selections.)
    b. Click **Continue**.

General

Review Plan Cycle # 1

Description: ?

Enter a description of the plans or documents you are uploading...

Requirements

🚫 **Calculations**
This document is required.

🚫 **Site Layout**
This document is required.

🚫 **Technical Data Sheets**
This document is required.

Continue

17. Fill out Step 2: File Processing/Add & Process Files.
    a. Upload required documents and select a document type. Click **Upload and Validate**.

Browse or drag and drop the desired files to upload. Once all files are added, the **Upload and Validate** button is displayed. Click on it to validate the files and add them to your review package. When all of the desired files are uploaded and validated, click the **Process Files** button to prepare your files for review.

Note: Please do not combine plans and documents of various types into a single PDF document.

b. After files are Status = Validated, click **Process Files**.

c. When the files are Status = Processed, click **Continue**.

18. Fill out Step 3: Sheet Versioning/Version Plan Sheets.
   a. Enter sheet number, if applicable.
   b. Click **Continue**.

Step 3: Version Plan Sheets

Displayed below are the sheets extracted from files in this review package. Please review the sheet numbers that automatically populated for each title block to ensure they are correct and match the plan page. If any title block is missing the corresponding sheet number, you will need to manually enter that number. You can save your work and come back later if needed, or click **Continue** when you are done.

Sheets

Showing a total of 2 sheets   ⦿ Show only error sheets

Title Block	Thumbnail	Sheet number and title
HT CROSS SECTION T 18 ELEVATIONS (HIGHEST 1-18)	↻	I-18
		Sheet title (optional)
		🗎 Drawing_220330104.pdf *(Page: 1)*
	↻	CT0R
		Sheet title (optional)
		🗎 Drawing_220330104.pdf *(Page: 2)*

[Save and resume later]   [Continue]

19. On Step 4: Review/Review, review the package details, then click **Finish**.

Step 4:Review

Please review the information below and ensure you have uploaded all of the plans and documents for this review cycle. Click the **Edit** buttons to make any needed changes or to upload any remaining documents.
Once you click **Finish**, your review cycle will begin and additional documents cannot be uploaded until after the review cycle has been completed.

[Finish]

20. A confirmation screen will verify that your review package has been received. Additionally, a "Plans and Documents received" notification will be sent to all contacts on the record.

✓ Success.
Your review package has been received.

Digital Plan Room
Record: FTNKI-2022-00079
Address:
Status: [SUBMITTED]

Record Details	Summary	Uploads	Issues	Conditions	Notes	Approved

Review Package Details

Name: Review Plan Cycle # 1
Description:
Status: Submitted
Date created: 10/6/2022, 7:07:17 PM
Date submitted: 10/6/2022, 7:13:21 PM

*If you have any questions, please contact the Revenue and Records Branch either by phone, 703-246-4803 or by email Fire.revenuepermits@fairfaxcounty.gov.