



The Commonwealth of Massachusetts  
Department of Fire Services



## AST Approved Standard Declaration Form

for an aboveground storage tank, in excess of 10,000-gallon gross capacity,  
for the storage of fluids other than water.

FP-101A  
(Rev. 3.2019)

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**Tank Information:** Office of the State Fire Marshal number: **OSFM #** \_\_\_\_\_  None

Business Name: \_\_\_\_\_

Address (or location) of tank: \_\_\_\_\_ City/town: \_\_\_\_\_

Tank gross capacity (aggregate if compartmented) \_\_\_\_\_  Gallons  Barrels  Cubic Feet

Operator's Tank Identification (i.e. Tank #4): \_\_\_\_\_

Tank description: \_\_\_\_\_

Tank construction standard:  API 650/12C  UL 142  UL 2080  ASME  
 UL 2085  None  Other: \_\_\_\_\_

Compartmented tank?  No  Yes Secondary Containment Type:  Dike  Doublewall  Vault  None

Fluid stored in tank: \_\_\_\_\_

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**Approved Standard Declaration:** In accordance with 502 CMR 5.04, the owner of the tank shall declare the Approved Standard for the on-going inspection and maintenance of the tank. With this declaration, the tank must be maintained in accordance with the maintenance, testing, and inspection requirements in the Approved Standard for the life of the tank. The Approved Standard shall not be changed unless approved, in writing, by the Office of the State Fire Marshal.

The tank maintenance, testing, and inspection shall be in accordance with the following Approved Standard:

- American Petroleum Institute (API) 653 – Tank Inspection, Repair, Alteration, and Reconstruction
  - American Petroleum Institute (API) 510 – Pressure Vessel Inspection Code
  - Steel Tank Institute (STI) SP 001 – Standard for the Inspection of Aboveground Storage Tanks
  - National Board Inspection Code (NBIC) – National Board of Boiler and Pressure Vessel Inspectors
  - Fiberglass Tank & Pipe Institute – In-Service Inspections of Aboveground Atmospheric FRP Tanks and Vessels
  - Other (must be approved by the Office of the State Fire Marshal prior to use). Attach request with supporting documentation – must be from a Massachusetts Professional Engineer
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### Qualified Tank Inspector Information:

Printed Name: \_\_\_\_\_

Work Phone number: \_\_\_\_\_ Cell Phone number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

API 653  ASME Pressure Vessel Inspector  STI SP001 Inspector  Fiberglass Inspector  
 Mass Professional Engineer  Other: \_\_\_\_\_

License Number #: \_\_\_\_\_ Exp. \_\_\_\_\_

By signing below, I certify that this tank falls within the scope of the Approved Standard declared above.

Qualified Tank Inspector's signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**Submittal Requirements - Please remember to send this completed form to Department of Fire Services, PO Box 51025, Attention: - AST Program, Indian Orchard, MA 01151.**