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.

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: _______________________________________________________

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

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: ________________

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