



PBS Number: 8-060577

# Petroleum Bulk Storage Application

New York State Department of Environmental Conservation  
Division of Environmental Remediation

Pursuant to the Environmental Conservation Law: Article 17, Title 10; and Regulations 6 NYCRR Part 613 and 6 NYCRR Subpart 374-2

(Please Type or Print Clearly and Complete All Items for Sections A, B & C)

## Section A - Facility/Property Owner/Contact Information

Return Completed Form & Fees To:  
NYSDEC Region 8  
6274 East Avon-Lima Road  
Avon, NY 14414-8519  
(585) 226-2466

Expiration Date: 12/02/2026

<b>Transaction</b> Type: <input type="checkbox"/> 1) Initial/New Facility <input type="checkbox"/> 2) Change of Ownership <input type="checkbox"/> 3) Tank Installation, Closing, or Repair <input type="checkbox"/> 4) Information Correction <input type="checkbox"/> 5) Renewal		<b>NOTE:</b> Fill in Property Information here...>>> Indicate Tank Owner in Section C.	
<b>Facility Name:</b> VA MEDICAL CENTER <b>Tax Map:</b> [ ] <b>Borough/Section:</b> [ ] <b>Block:</b> [ ] <b>Lot:</b> [ ] <b>Facility Address (Physical Address, No P.O. Boxes):</b> 400 FORT HILL AVENUE <b>Facility Address (cont.):</b> [ ]		<b>City:</b> CANANDAIGUA <b>State:</b> NY <b>ZIP:</b> 14424 <b>County:</b> Ontario <b>Township or City:</b> Canandaigua (c) <b>Facility Phone Number:</b> (585) 394-2000	
<b>Facility Operator:</b> ERIC SMITH <b>Facility Operator:</b> [ ] <input type="checkbox"/> 99=Other (Specify): FEDERAL H <input type="checkbox"/> 53=Nuclear Power Plant <input type="checkbox"/> 27=Hospital/Nursing Home/Health Care <input checked="" type="checkbox"/> 52=Marina <input type="checkbox"/> 26=Religious (Church, Synagogue, Mosque, Temple, etc.) <input type="checkbox"/> 25=Auto Service/Repair (No Gasoline Sales) <input type="checkbox"/> 28=Cemetery/Memorial <input type="checkbox"/> 15=Railroad <input type="checkbox"/> 12=Chemical Distributor <input type="checkbox"/> 10=Private Residence <input type="checkbox"/> 09=Farm <input type="checkbox"/> 07=Apartment/Office Building <input type="checkbox"/> 05=Utility <input type="checkbox"/> 03=Other Retail Sales <input type="checkbox"/> 04=Manufacturing <input type="checkbox"/> 06=Trucking/Transportation/Fleet <input type="checkbox"/> 08=School <input type="checkbox"/> 01=Storage Terminal/Petrol. Distributor <input type="checkbox"/> 02=Retail Gasoline Sales <b>TYPE OF PETROLEUM FACILITY (Check only one)</b>		<b>Facility (Property) Owner (from Deed):</b> DEPARTMENT OF VETERANS AFFAIRS <b>Facility Owner Address (Street and/or P.O. Boxes):</b> 400 FORT HILL AVENUE <b>City:</b> CANANDAIGUA <b>State:</b> NY <b>ZIP Code:</b> 14424 <b>Owner Telephone Number:</b> (585) 394-2000 <b>Type of Owner (check only one):</b> <input type="checkbox"/> 3 Local Government <input checked="" type="checkbox"/> 4 Federal Government <input type="checkbox"/> 5 State Government (Please keep this information up to date.)	
<b>Emergency Contact Name:</b> VA FIRE DEPARTMENT <b>Emergency Telephone Number:</b> (585) 393-7434		<b>Official Use:</b> Only <b>Date Received:</b> 04/23/26 <b>Date Processed:</b> 05/06/26 <b>Amount:</b> \$ N/A <b>Reviewed By:</b> MJS <b>Rev. 12/22/2022</b>	



**Section B - Tank Information**

*(Please use the key located on the last page to complete each item/column)*

**PBS Number:  
8-060577**

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)	(20)	(21)
Action	Tank Number	Tank Location	Status	Installation, out-of-service, or Permanent Closure Date (mm/dd/yyyy) Application will be returned if blank	Capacity (Gallons)	Product Stored (If Gasoline w/ethanol or Biodiesel, list % additive)	Tank Type	Tank Internal Protection	Tank External Protection	Tank Secondary Containment	Tank Leak Detection	Tank Overfill Prevention	Tank Spill Prevention	Pumping/Dispensing Method	Piping Location	Piping Type	Piping External Protection	Piping Secondary Containment	Piping Leak Detection	Under Dispenser Containment (UDC) (Check box if present)
	020	3	1	8/12/2024	1,000	0008	01	01	01	09	02	04	01	06	00	00	00	00	00	<input type="checkbox"/>
	022	3	1	4/12/2006	100	2731	01	00	01	01	06	04	00	02	01	01	01	00	00	<input type="checkbox"/>
	023	3	1	4/12/2006	50	2731	01	00	01	01	06	04	00	02	01	01	01	00	00	<input type="checkbox"/>
	024	3	1	10/4/2011	250	0009	05	00	99	03 12	02	04 05	01	02	01	01	01	00	09	<input type="checkbox"/>
	025	3	1	10/5/2012	8,000	2731	01	01	01	09	01	01 02	01	02	01	01	01	00	00	<input type="checkbox"/>
	026	2	1	11/20/2015	200	0022	07	99	99	12	02	01 04	00	00	00	00	00	00	00	<input type="checkbox"/>
	027	3	1	3/1/2017	200	2731	01	00	01	99	01	02 04	01	02	01	01	01	00	00	<input type="checkbox"/>
	028	3	1	1/7/2019	583	2731	01	01	01	12	02 06	02 04	00	00	00	00	00	00	00	<input type="checkbox"/>
	029	3	1	3/28/2019	1,000	2731	01	01	01	12	01 06	02 04	01	00	00	00	00	00	00	<input type="checkbox"/>
	030	3	2	5/11/2020	15,000	2731	01	00	01	12	01	02 04	01	05	03	01	04	04	00	<input type="checkbox"/>
4	031	3	1	12/16/2020	50,000	0001	01	00	01	12	01	02	00	05	02	01	04	04	01	<input type="checkbox"/>
	031	3	1	12/16/2020	50,000	0001	01	00	01	12 99	01	02 04	01	05	03	01	04	04	01	<input type="checkbox"/>
	032	3	1	1/15/2021	230	2731	01	01	01	01	01	02	00	02	00	00	00	00	00	<input type="checkbox"/>

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**Section B - Tank Information**  
*(Please use the key located on the last page to complete each item/column)*

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)	(20)	(21)
Action	Tank Number	Tank Location	Status	Installation, out-of-service, or Permanent Closure Date (mm/dd/yyyy)	Capacity (Gallons)	Product Stored (If Gasoline w/ethanol or Biodiesel, list % additive)	Tank Type	Tank Internal Protection	Tank External Protection	Tank Secondary Containment	Tank Leak Detection	Tank Overfill Prevention	Tank Spill Prevention	Pumping/Dispensing Method	Piping Location	Piping Type	Piping External Protection	Piping Secondary Containment	Piping Leak Detection	Under Dispenser Containment (UDC) (Check box if present)
	033	3	1	4/19/2021	460	2731	01	00	01	99	01	02	01	02	01	01	00	12	00	<input type="checkbox"/>
	034	3	4	4/19/2021	535	2731	01	01	01	01	05	03	01	00	00	00	00	00	00	<input type="checkbox"/>
	035	3	1	9/1/2023	970	2731	01	00	01	01	00	04	00	00	00	00	00	00	00	<input type="checkbox"/>
	036	3	1	9/1/2023	2,000	2731	01	00	01	12	01	02	04	00	00	00	00	00	00	<input type="checkbox"/>

Note: If you need to add tanks to your registration, write them in using blank lines above. Attach additional sheets as needed. Blank Section B is available at [http://www.dec.ny.gov/docs/remediation\\_hudson\\_pdf/pbsrenewal.pdf](http://www.dec.ny.gov/docs/remediation_hudson_pdf/pbsrenewal.pdf)



			035
		036	

**PETROLEUM BULK STORAGE APPLICATION - SECTION B - TANK INFORMATION - CODE KEY!**

**Action (1)**

1. Initial Listing
2. Add Tank
3. Close/Remove Tank
4. Information Correction
5. Repair/Reline Tank

**Tank Location (3)**

1. Aboveground-contact w/soil
2. Aboveground-contact w/impervious barrier
3. Aboveground on saddles, legs, stilts, rack or cradle
4. Partially buried tank (tank with 10% or more below ground)
5. Underground including vaulted with no access for inspection
6. Aboveground in Subterranean Vault w/access for inspections

**Status (4)**

1. In-service
2. Out-of-service
3. Closed-Removed
4. Closed- In Place
5. Tank converted to Non-Regulated use

**Products Stored (7)**

**Heating Oils: On-Site Consumption**

- 0001. #2 Fuel Oil
- 0002. #4 Fuel Oil
- 0259. #5 Fuel Oil
- 0003. #6 Fuel Oil
- 0012. Kerosene
- 0591. Clarified Oil
- 2711. Biofuel Oil
- 2642. Used Oil (Heating)

**Heating Oils: Resale/Redistribution**

- 2718. #2 Fuel Oil
- 2719. #4 Fuel Oil
- 2720. #5 Fuel Oil
- 2721. #6 Fuel Oil
- 2722. Kerosene
- 2723. Clarified Oil
- 2724. Biofuel Oil

**Motor Fuels**

- 0009. Gasoline
- 2712. Gasoline/Ethanol

- 0008. Diesel
- 2710. Biodiesel
- 0011. Jet Fuel
- 1044. Jet Fuel (Biofuel)
- 2641. Aviation Gasoline

**Emergency Generator Fuels**

- 0001. #2 Fuel Oil
- 2730. Biodiesel (E-Gen)
- 2731. Diesel (E-Gen)

**Lubricating/Cutting Oils**

- 0013. Lube Oil
- 0015. Motor Oil
- 1045. Gear/Spindle Oil
- 0010. Hydraulic Oil
- 0007. Cutting Oil
- 0021. Transmission Fluid
- 1836. Turbine Oil
- 0308. Petroleum Grease

**Oils Used as Building Materials**

- 2626. Asphaltic Emulsions
- 0748. Form Oil

**Petroleum Spirits**

- 0014. White/Mineral Spirits
- 1731. Naptha

**Mineral/Insulating Oils**

- 0020. Insulating Oil (e.g., Transformer, Cable Oil)
- 2630. Mineral Oil

**Waste/Used/Other Oils**

- 0022. Waste/Used Oil
- 9999. Other-Please list:\*

**Crude Oil**

- 0006. Crude Oil
- 0701. Crude Oil Fractions

**Tank Type (8)**

- 01. Steel/Carbon Steel/Iron
- 02. Galvanized Steel Alloy
- 03. Stainless Steel Alloy
- 04. Fiberglass Coated Steel
- 05. Steel Tank in Concrete
- 06. Fiberglass Reinforced Plastic (FRP)
- 07. Plastic
- 08. Equivalent Technology

- 09. Concrete
- 10. Urethane Clad Steel
- 99. Other-Please list:\*

**Internal Protection (9)**

- 00. None
- 01. Epoxy Liner
- 02. Rubber Liner
- 03. Fiberglass Liner (FRP)
- 04. Glass Liner
- 99. Other-Please list:\*

**External Protection (10/18)**

- 00. None
- 01. Painted/Asphalt Coating
- 02. Original Sacrificial Anode
- 03. Original Impressed Current
- 04. Fiberglass
- 05. Jacketed
- 06. Wrapped (Piping)
- 07. Retrofitted Sacrificial Anode
- 08. Retrofitted Impressed Current
- 09. Urethane
- 99. Other-Please list:\*

**Tank Secondary Containment (11)**

- 00. None
- 01. Diking (AST Only)
- 02. Vault (w/access)
- 03. Vault (w/o access)
- 04. Double-Walled (UST Only)
- 05. Synthetic Liner
- 06. Remote Impounding Area
- 07. Excavation Liner
- 09. Modified Double-Walled (AST Only)
- 10. Impervious Underlayment (AST Only)\*\*
- 11. Double Bottom (AST Only)\*\*
- 12. Double-Walled (AST Only)
- 99. Other - Please list\*

**Tank Leak Detection (12)**

- 00. None
- 01. Interstitial Electronic Monitoring
- 02. Interstitial Manual Monitoring
- 03. Vapor Well
- 04. Groundwater Well
- 05. In-Tank System (Auto Tank)

- 06. Impervious Barrier/Concrete Pad (AST Only)
- 07. Statistical Inventory Reconciliation (SIR)
- 08. Weep holes in vaults with no access for inspection
- 99. Other-Please list: \*

**Overfill Protection (13)**

- 00. None
- 01. Float Vent Valve
- 02. High Level Alarm
- 03. Automatic Shut-Off (AST Only)
- 04. Product Level Gauge (AST Only)
- 05. Vent Whistle
- 99. Other-Please list:\*

**Spill Prevention (14)**

- 00. None
- 01. Catch Basin
- 99. Other-Please list:\*

**Pumping/Dispensing Method (15)**

- 00. None
- 01. Pressurized Dispenser
- 02. Suction Dispenser
- 03. Gravity
- 04. On-Site Heating System (Suction)
- 05. On-Site Heating System (Supply/Return)
- 06. Tank-Mounted Dispenser
- 07. Loading Rack/Transfer Pump

**Piping Location (16)**

- 00. No Piping
- 01. Aboveground
- 02. Underground/On-ground
- 03. Aboveground/Underground Combination

**Piping Type (17)**

- 00. None
- 01. Steel/Carbon Steel/Iron
- 02. Galvanized Steel
- 03. Stainless Steel Alloy
- 04. Fiberglass Coated Steel
- 05. Steel Encased in Concrete

- 06. Fiberglass Reinforced Plastic (FRP)
- 07. Plastic
- 08. Equivalent Technology
- 09. Concrete
- 10. Copper
- 11. Flexible Piping
- 99. Other-Please list:\*

**Piping Secondary Containment (19)**

- 00. None
- 01. Diking (Aboveground Only)
- 02. Vault (w/access)
- 04. Double-Walled (Underground Only)
- 06. Remote Impounding Area
- 07. Trench Liner
- 12. Double-Walled (Aboveground Only)
- 99. Other-Please list: \*

**Pipe Leak Detection (20)**

- 00. None
- 01. Interstitial Electronic Monitoring
- 02. Interstitial Manual Monitoring
- 03. Vapor Well
- 04. Groundwater Well
- 07. Pressurized Piping Leak Detector
- 09. Exempt Suction Piping
- 10. Statistical Inventory Reconciliation (SIR)
- 99. Other-Please list:\*

**Under Dispenser Containment (UDC) (21)**

**(UDC) (21)**

Check Box if Present

\* If other, please list on a separate sheet including tank number.

\*\* Each of these codes must be combined with code 01 or 06 to meet compliance requirements.