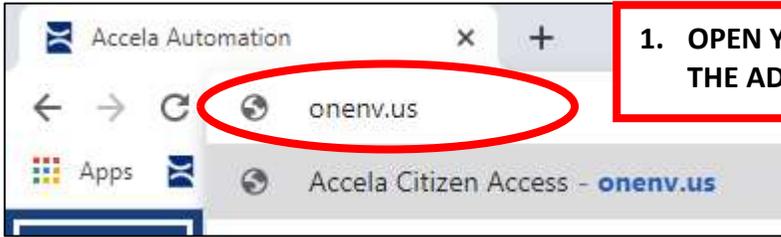
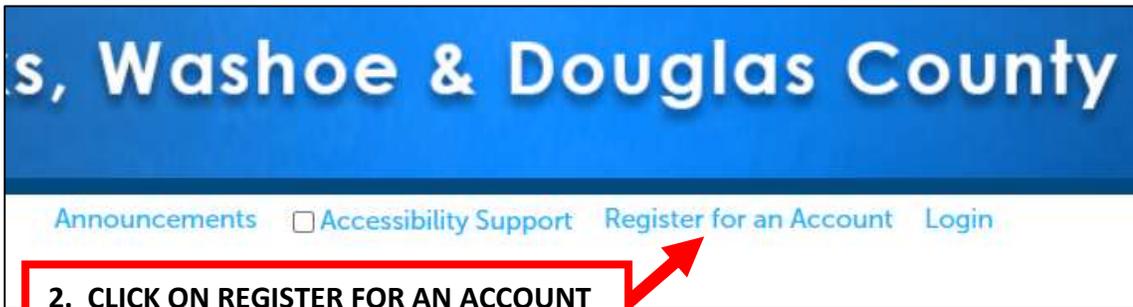


Online UST Annual Permit Application Submittal Instructions

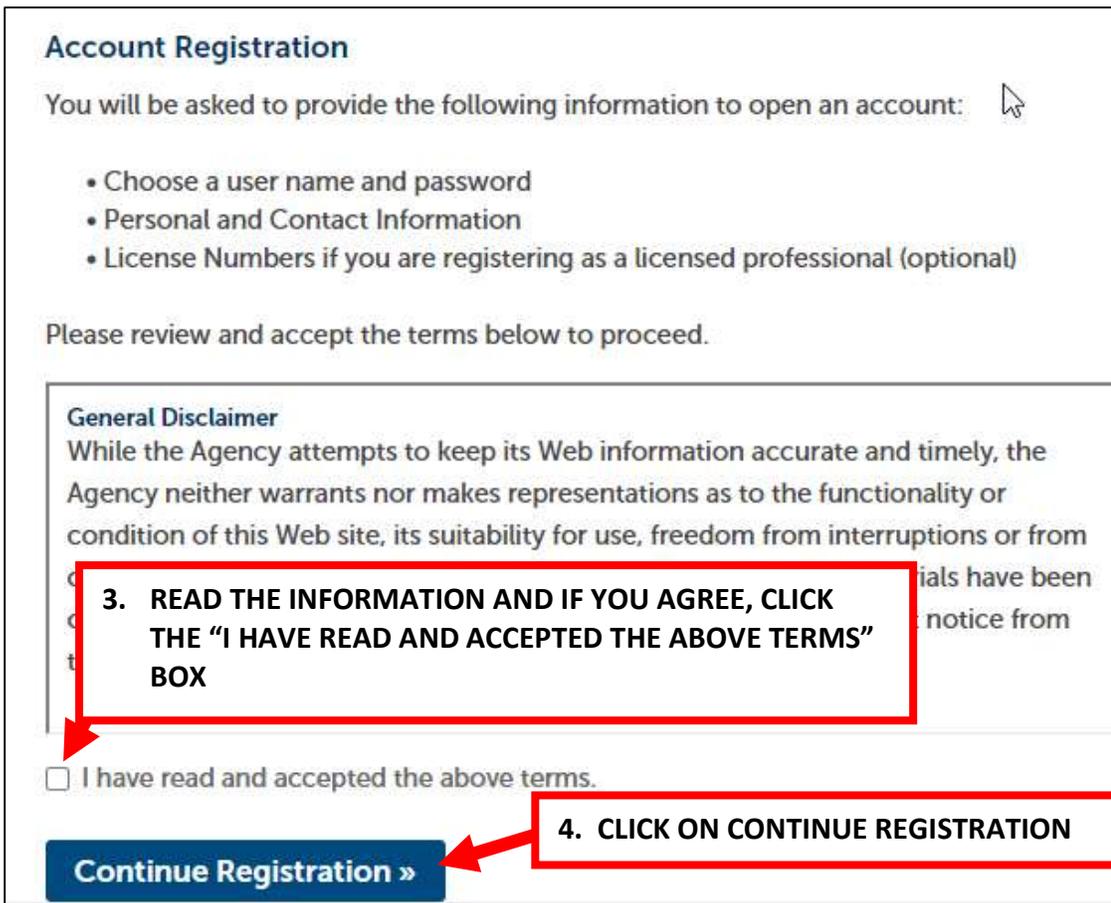


1. OPEN YOUR INTERNET BROWSER AND IN THE ADDRESS BAR TYPE ONENV.US

CREATE AN ACCELA CITIZEN ACCESS ACCOUNT (SKIP TO STEP 16 IF YOU ALREADY HAVE ONE)



2. CLICK ON REGISTER FOR AN ACCOUNT



3. READ THE INFORMATION AND IF YOU AGREE, CLICK THE "I HAVE READ AND ACCEPTED THE ABOVE TERMS" BOX

4. CLICK ON CONTINUE REGISTRATION

Account Registration Step 2: Enter/Confirm Your Account Information

Login Information

5. FILL OUT THE INFORMATION BELOW

Enter your User Name and Password. You must also enter a unique email address

* User Name: 

* E-mail Address:

* Password: 

* Type Password Again:

* Enter Security Question: 

* Answer: 

Contact Information

Choose how to fill in your contact information.

Add New

6. CLICK ADD NEW

Continue Registration »

Select Contact Type ✕

* Type:

--Select--
 --Select--
 Individual
 Organization
 Continue Discard Changes

7. CLICK ON THE OPTION THAT FITS PER THE OWNERSHIP CATEGORIES TO THE RIGHT.

OWNERSHIP CATEGORY

CORPORATION - ORGANIZATION
 PARTNERSHIP - ORGANIZATION
 LLC - ORGANIZATION
 INDIVIDUAL - INDIVIDUAL

Contact Information

* Individual/Organization:
 Organization

* Name of Business: Work Phone:

DBA/Trade Name: Mobile Phone:

* E-mail: * Preferred Contact Method: --Select--

▼ Contact Addresses

Add Contact Address

To add a new contact address, click 'Add Contact Address'. To edit or remove a contact address, click 'Actions' needed.

Showing 0-0 of 0

Address Type	Address	Action
No records found.		

Continue Clear Discard Changes

8. FILL OUT THE INFORMATION BELOW
 PLEASE INCLUDE YOUR PHONE NUMBER

9. CLICK ON ADD CONTACT ADDRESS

Contact Address Information

10. FILL OUT THE BELOW INFORMATION

* Address Type:
 --Select--
 --Select--
 Business
 Mailing

* Address Line 1:

Address Line 2:

Address Line 3:

* City: * State: --Select-- * ZIP Code:

* Country/Region:
 United States

11. WHEN FINISHED WITH ADDING THE ADDRESSES, CLICK SAVE AND CLOSE

Save and Close **Save and Add Another** **Clear** Discard Changes

Contact Information

Organization

* Name of Business: Work Phone:

DBA/Trade Name: Mobile Phone:

* E-mail: * Preferred Contact Method: --Select--

▼ Contact Addresses

Add Contact Address

To add a new contact address, click 'Add Contact Address'. To edit or remove a contact address, click 'Action' needed.

Showing 0 records

Address type	Address	Action
No records found.		

12. CLICK CONTINUE

Continue **Clear** Discard Changes

► [Contact Addresses](#)

Add Contact Address

To add a new contact address, click 'Add Contact Address'. To edit an existing address, click 'Edit'. To delete an address, click 'Delete'. To add a new address, you need a valid email address and phone number.

13. VERIFY INFORMATION

Showing 1-1 of 1

Address Type	Address
Mailing	1001 E 9TH ST

14. IF INFORMATION IS CORRECT, CLICK CONTINUE REGISTRATION

Continue Registration »

 Your account has been created successfully. You can login immediately using your User Name and Password

Congratulations. You have successfully registered an account.

15. YOU SHOULD SEE THIS NOTIFICATION

s, Washoe & Douglas County

[Announcements](#) [Accessibility Support](#) [Register for an Account](#) [Login](#)

16. CLICK LOGIN

Login

User Name or E-mail:

Password:

Login »

Remember me on this computer

[I've forgotten my password](#)
[New Users: Register for an Account](#)

17. LOGIN WITH YOUR USER NAME AND PASSWORD YOU CREATED

Home Building Business Licensing Enforcement Engineering Fire Health District Planning

Dashboard My Records My Account **18. CLICK HEALTH DISTRICT**

Home Building Business Licensing Enforcement Engineering Fire **Health District**

Create an Application by Agency **19. CLICK CREATE AN APPLICATION BY AGENCY** Search Applications

Select Services

 **Search**

- ▶ Short Term Rentals
- ▶ Building EZ - Commercial
- ▶ Building EZ - Residential
One- and Two- Family Dwelling Units Only
- ▶ Building
- ▶ Building - Over the Counter (OTC)
Select your OTC Permit here
- ▶ Engineering
- ▶ Fire
- ▶ **Health**
- ▶ Licenses
Select all license types that pertain to your business
- ▶ Planning

Continue Application

▼ Health

- Washoe County - Air Quality Asbestos
- Washoe County - Air Quality Dust Control
- Washoe County - Air Quality Stationary Source
- Washoe County - Air Quality Woodstove
- Washoe County - Child Care Facility
- Washoe County - Cottage Food Operation
- Washoe County - Farm-to-Fork
- Washoe County - Food Illness Complaint
- Washoe County - Food Permit
- Washoe County - Food Permit Exemption
- Washoe County - Garbage Exemption
- Washoe County - Invasive Body Decoration
- Washoe County - Liquid Waste Trucks
- Washoe County - Mobile Home & RV Parks
- Washoe County - Public Accommodations
- Washoe County - Public Bathing Permit
- Washoe County - RV Dump Stations
- Washoe County - Schools Permit
- Washoe County - Underground Storage Tank Annual Permit
- Washoe County - Underground Storage Tank Construction (New Installation/Remodel/Upgrade)
- Washoe County - Underground Storage Tank Decommissioning
- Washoe County - Waste Generator Registration
- Washoe County - Waste Management
- Washoe County - Well Construction
- Complaint

21. CLICK ON THE CIRCLE NEXT TO WASHOE COUNTY – UNDERGROUND STORAGE TANK ANNUAL PERMIT

▶ Licenses

Select all license types that pertain to your business

▶ Planning

▶ Other

22. CLICK ON CONTINUE APPLICATION

Continue Application

CONTINUED ON NEXT PAGE

*Street No.: Direction: --Select-- *Street Name: Street Type: --Select--

Unit Type: --Select--

23. **ONLY** FILL IN THE STREET NO. AND STREET NAME

City: State: --Select-- *Zip:

24. **CLICK SEARCH**

Parcel

*Parcel Number: **PARCEL NUMBER NOT REQUIRED**

Lot: Block: Subdivision: --Select--

Book: Page:

Tract: Legal Description:

Parcel Area:

Land Value: Improved Value: Exemption Value:

25. **CLICK CONTINUE APPLICATION**

26. ADD CONTACTS

*indicates a required field.

Applicant

To add new contacts, click the Select from Account or Add New button. To edit a contact, click the Edit link.

Select from Account Add New

APPLICANT SHOULD BE THE INDIVIDUAL THAT IS APPLYING

Business Name

For Business Name, use who you are Doing Business As for this facility.

Select from Account Add New

BUSINESS NAME SHOULD BE THE NAME OF THE BUSINESS AND THE ADDRESS SHOULD BE THE BUSINESS'S PHYSICAL ADDRESS

Billing Contact

By default, the Preferred Method of Contact for the Billing Contact is E-mail. You can change this when selecting "Add New" or clicking "Edit" after using "Select from Account".

Select from Account Add New

BILLING CONTACT SHOULD USE THE ADDRESS WHERE THE INVOICES WILL BE MAILED TO.

Business Owner

To add new contacts, click the Select from Account or Add New button. To edit a contact, click the Edit link.

Select from Account Add New

BUSINESS OWNER SHOULD BE THE NAME OF THE ORGANIZATION OR INDIVIDUAL WHO OWNS THE BUSINESS AND THE OWNER'S ADDRESS.

Continue Application »

27. CLICK CONTINUE APPLICATION

CONTINUED ON NEXT PAGE

Underground Storage Tank Annual Permit

1 Step 1

28. TYPE IN YOUR FACILITY ID NUMBER AND WCHD ID

NOTE. THE FACILITY ID & THE WCHD ID CAN BE FOUND IN THE LETTER YOU RECEIVED BY MAIL AND/OR EMAIL FROM THE WASHOE COUNTY HEALTH DISTRICT. IF YOU ARE UNABLE TO FIND THE ID NUMBERS, YOU CAN ACCESS OUR UST MASTER LIST ORGANIZED ALPHABETICALLY BY SITE NAME ON THE WASHOE COUNTY HEALTH DISTRICT, ENVIRONMENTAL HEALTH, UNDERGROUND STORAGE TANK WEBPAGE BY TYPING THE WEB ADDRESS BELOW IN YOUR INTERNET BROWSER ADDRESS BAR
<https://www.washoecounty.gov/health/programs-and-services/environmental-health/ust.php>

GENERAL INFORMATION

* Facility ID Number:

* WCHD ID:

Continue Application »

29. CLICK CONTINUE APPLICATION

30. VERIFY ALL THE INFORMATION IS CORRECT (IF INCORRECT CLICK EDIT TO THE RIGHT OF THE SECTIONS YOU WANT TO CHANGE)

31. CLICK CONTINUE APPLICATION

Step 3: Pay Fees

Listed below are preliminary fees based upon the information you've entered. Some fees are based on the quantity of work items installed or repaired. Enter quantities where applicable. The following screen will display your total fees.

Application Fees

Fees	Qty.	Amount
UST Annual Permit Fee	1	\$875.00

TOTAL FEES: \$875.00

Note: This does not include additional inspection fees which may be assessed later.

32. CLICK CHECK OUT

Check Out »

Step 1: Select item to pay

Items can be modified using a variety of actions. For example, you can modify existing information of an item by clicking Edit link, save it for future checkout by clicking the Save for Later link, remove it from the cart completely by clicking Remove link or elect to pay a fee item at a later date by clicking the Pay Later button.

EDIT CART

1001 E 9TH ST RENO NV 89512

1 Application(s) | \$875.00

Underground Storage Tank Annual Permit
22TMP-000138

Total due: \$875.00

WASHOE

Edit

Remove

Fee	Qty.	Amount
UST Annual Permit Fee	1	\$875.00

Total amount to be paid: \$875.00

Note: The amount shown is an estimate.

Save and Close

33. CLICK SAVE AND CLOSE

Step 1: Select item to pay

Click on the arrow in front of a row to display additional information. Items can be saved for a future checkout by clicking on the Save for later link.

PAY NOW

1001 E 9TH ST RENO NV 89512

1 Application(s) | \$875.00

Underground Storage Tank Annual Permit
22TMP-000138

Total due: \$875.00

WASHOE

34. CLICK CHECKOUT

Total amount to be paid: \$875.00

Note: This does not include additional inspection fees which may be assessed later. Payments of \$100,000 or more cannot be made online at this time. Please call the jurisdiction below to complete payment. If you receive any error, or your payment does not go through on the first try, DO NOT try again. Failure to do so may result in multiple payments being made. Please call the jurisdiction of the record you are trying to pay for and they will verify/complete your payment.

Checkout »

Edit Cart »

Continue Shopping »

Review and Pay

Agency	Record ID	Type	Description	Amount
WASHOE_HEALTH	22TMP-000138	Health/UST Annual/Permit/NA		\$875.00
				Subtotal \$875.00

35. CLICK PAYMENT TYPE: ECHECK OR CREDIT CARD

\$875.00 + Choose a Payment Type

ECheck

or

Credit Card

Contact Details

36. FILL OUT THE REQUIRED INFORMATION

First Name* Last Name*

Email* asantos@washoecounty.us

For a copy of your receipt:

Address Line 1* Address Line 2

City* State*

Billing Details

Credit Card Number* Expiration Date*

37. CHECK THE BOX IF YOU AGREE WITH THE STATEMENT

Name On Card* Zip / Postal*

I understand and agree to be automatically charged for each line item above and I may incur a non-refundable convenience fee

38. CLICK PAY NOW

Pay \$875.00 Now

39. APPLICATION SUBMITTAL IS COMPLETE