



LP GAS PLAN REVIEW FORM

Submission Date____

INSTALLATION CONCERN INFORMATION		
Concern Name:		Contact Person:
Physical Address:		
Mailing Address:		
Telephone:	Fax:	Tank / Cabinet Size:
Service Description:	Type of Vehicle	
Above Ground	Under Ground	Foundation, Footing, or Backfill:
LICENSED LP GAS INSTALLER INFORMATION		
Company Name:		
Physical Address:		
Mailing Address :		Telephone:
Contact Person:		Email:
REQUIRED INFORMATION		
or readable copy. <u>Do not</u> send faxes without prior approval from the Fire Marshal's office. Insufficient information, non-readable copy or non-payment of fees will be cause for rejection of plans. Provide a copy of the approval from the authority having jurisdiction: Building, Planning, Zoning, and/or Fire Department.		
SAMPLE DRAWING		
Read Street #		

PLAN REVIEW DRAWING INSTRUCTIONS

The plan or sketch is to include:

Size of tank(s) to be installed (water gallons), distance from tank to property lines, existing buildings, streets, roads and sidewalks, overhead power lines, and all sources of ignition in all directions.

Type of approved vehicle protection to be used. Guard posts or other approved means of protection for tank and piping shall be provided. International Fire Code (2018 Edition) Chapter 3 Section 312 and NFPA 58 (2017 Edition)

Location of minimum 18 lb. B.C. fire extinguisher within 75 feet of dispenser.

PLAN REVIEW DRAWING



Revised: June 2020