## LIQUIFIED PETROLEUM GAS APPLICATION

In accordance with the Code of the Town of Gates and the NYS Fire Prevention and Building Code, no permit-required work will begin prior to the issuance of proper permits and/or approvals by the Town of Gates.

## **Town of Gates**

Office of the Fire Marshal 1605 Buffalo Road Rochester, NY 14624 (585) 247-6100 (585) 426-8581 Fax www.townofgates.org



All fields must be completed. If not appl	licable, please mark with N/A Date:	
UNSIGNED APPLICATIONS WILL BE RETURNED		
	SITE INFORMATION	
BUILDING/SITE NAME:		
BUILDING/SITE ADDRESS:		
MAILING ADDRESS:		
AF	PPLICANT INFORMATION	
BUSINESS NAME:		
ADDRESS:		
PHONE#: FAX#	t: E-MAIL:	
CONTACT NAME:		
SIGNATURE:		
(SUB) COM	NTRACTOR PERFORMING WORK	
(CONTRACTOR PERFORMING WORK MUST HAVE WORKMEN'S COMPENS	SATION INSURANCE CERTIFICATE ON FILE IN THE BUILDING DEPT. NAMING THE TOWN OF GATES AS ADDITIONAL INSURED)	
NAME:		
ADDRESS:		
PHONE#: FAX#		
ON SITE CONTACT NAME:	CELL PHONE#:	
DOES THE SCOPE OF THIS PROJECT INVOLVE MORDOES THIS WORK INVOLVE MORE THAN ONE TANK DOES THIS WORK INVOLVE THE INSTALLATION OF PURPOSE: Installation   Addition	A PROPANE EXCHANGE?  YES  NO  TOTAL # of Locations NO  TOTAL # of Cages	
IS THIS A REPLACEMENT OF AN EXISTING	3 TANK? YES □ NO □	
Submittal of plans, application and payment of fe	es does not imply permission or permit by the Town of Gates for commencement of work.	
APPROVED PLANS AND A COPY OF THE PERMIT MUST BE KEPT ON SITE DURING INSTALLATION AND USE		
<b>TYPE</b>	<u>Y/N</u>	
To install, maintain and operate Propane Exchange To install, maintain and operate Temporary LPG To install, maintain and operate bulk propane stora	ank / Container ge 0 – 500 lbs. ge 501 – 2,500 lbs. ge 2,501 – 6,000 lbs. ge 6,001 – 10,000 lbs.	

(continued on reverse)

<b>Note:</b> The issuance of a permit shall not prevent the Fire Marshal from thereafter requiring correction of deficiencies found during a fire safety inspection by the Fire Marshal or Fire Department.		
<b>TANK USE:</b> Stationary Use □	l Vehicle Refueling/Filling □ Portable Tank Filling □ Not Applicable □	
PROJECT NARRATIVE: (Including specific location of work and tank(s):		
Describe Physical Securing of Tanks / Co.	ntainers:	
Describe Product Handling Safety Precaut	tions:	
Location of LPG Tanks / Containers:		
Describe Vehicle Impact Protection:		
QUANTITY OF PRODUCT(S) AND T	ANK SIZE:	
Indicate What The Surface Material Is Under The Ta	ank / Container:	
1	bass a visual inspection by a representative of the Office of the Fire Marshal. the Fire Marshal at least 24 hours in advance to schedule inspections.	
ON FILE IN THE TOWN OF GATES THE FOLLOWING ARE INCLI	ORK MUST HAVE WORKMEN'S COMPENSATION INSURANCE CERTIFICATE BUILDING DEPT. NAMING THE TOWN OF GATES AS ADDITIONAL INSURED UDED AND REQUIRED FOR SUBMITTAL:  Copies (stamped and signed by an Architect or	
Engineer)	ed for Propane Exchange)	