

A SIGNED COPY OF THE CONTRACT MUST BE SUBMITTED WITH APPLICATION



Tax Parcel # _____

Date _____

TANK PERMIT APPLICATION

**For all installations or removal of underground,
above ground, or abandoned flammable liquid tanks.**

Willistown Township

688 Sugartown Road

Malvern, PA 19355

Phone 610.647.5300

Fax 610.647.8156

PA State Registration # _____ Cert Ins _____ Liability _____ W/C _____

ICC Certification # _____ WT Registration # _____

Application is hereby made for a permit to install, erect, alter, or remove flammable liquid tanks which shall be located as shown on diagram to be included with this application, and to use the premises for the purposes described herewith. The information that follows, together with location diagram, is made part of this application by the undersigned. It is understood and agreed by this applicant that any error, misstatement or misrepresentation of material fact, either with or without intention on the part of this applicant, may result in the refusal of this application. Any changes including the location, size or use of flammable liquid tanks to land made subsequent to the issuance of this permit, without approval of the Building Code Official shall constitute sufficient ground of the revocation of this permit and/or prosecution.

A. Location, Ownership and Present Use of Property: (installation and removal)

1. Address _____

2. Property Owner _____

3. Owner's Address _____

4. Present Tenant _____

Does tenant have owner's consent for this work? Yes No

5. Use of Building: Residential _____ Commercial _____ Mixed Use _____

No. of Units _____ No. of Spaces _____ Res _____ Com _____

Type of Building: Frame Masonry Other _____

6. Fire District _____ Zoning District _____

B. Applicant: (installation and removal)

1. Owner, Lessee, or Authorized Agent for Owner of Property _____

2. Contractor _____

3. Address of Contractor _____

4. Business License # _____ Insurance WC Self-Insured Exemption

5. Contractor's Signature _____

C. Tank Installation :

1. Proposed Use of Facility _____

2. Proposed Use of Land _____

3. Type of Structure: New Existing Addition Change of Use Other

4. Tank Location: Above Ground Below Ground Exterior Interior

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5. Liquid to be Handled _____
6. Number of Tanks to be Installed _____
- Tank #1: Tank Capacity _____ gallons Length _____ ft. _____ in.
Material _____ Gauge _____ Dia. _____
- Tank #2: Tank Capacity _____ gallons Length _____ ft. _____ in.
Material _____ Gauge _____ Dia. _____
- Tank #3: Tank Capacity _____ gallons Length _____ ft. _____ in.
Material _____ Gauge _____ Dia. _____
- Tank #4: Tank Capacity _____ gallons Length _____ ft. _____ in.
Material _____ Gauge _____ Dia. _____
7. Above-ground tanks must comply with 2009 International Fire Code sections 2703.5, 2703.5.1, & 2703.6 & NFPA 704.
8. Number, type, and rating of fire extinguishers provided on premises _____
9. State Approval Number _____ Cost of Installing Tank(s) \$ _____

D. Tank Removal:

1. Number of Tanks to be Removed _____
- Tank #1: Tank Capacity _____ gallons
Located: Above Ground Below Ground Exterior Interior
- Tank #2: Tank Capacity _____ gallons
Located: Above Ground Below Ground Exterior Interior
- Tank #3: Tank Capacity _____ gallons
Located: Above Ground Below Ground Exterior Interior
2. Cost of Removal \$ _____
3. Comments _____

Please Note:

- Building Code Official shall be notified at time of actual tank removal and prior to back filling. **NO EXCEPTIONS**
- Tanks must be depicted on site plan indicating measurement to lot lines. If underground, indicate depth to bottom of tanks.
- All exterior piping and electrical systems shall be removed.
- Soil samples shall be taken and analyzed for contaminants. Copy of results shall be forwarded to the Building Code Official.
- Pennsylvania State Police Fire Marshall shall be notified, in writing, prior to the abandonment and removal of tanks. Provide notice to State Police
- Back fill must be compacted according to acceptable practice, where applicable ICC codes.

Please do NOT write below this line

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Permit # _____ Date Received _____ Date Issued _____ Amount Paid \$ _____

Code Administration Officer _____ Date _____

Approved _____ Reason for Disapproval _____

Comments _____

Building Code Official _____ **Date** _____

Fire Inspector _____ **Date** _____