



LP-GAS/WATER SOFTENER CONTAINER INSTALLATION APPLICATION

GENERAL CONTRACTOR _____

PHONE NO.

ADDRESS _____

() - (OFFICE)

CITY, STATE & ZIP _____

() - (MOBILE)

EMAIL ADDRESS _____

PROJECT SITE ADDRESS: _____ OWNER: _____

LOT(S): _____ BLOCK: _____ SUBDIVISION: _____ SUBD. GATE CODE _____

SCOPE OF WORK:

TANK INFORMATION

LOCATION

TYPE OF INSTALLATION: RESIDENTIAL/COMMERCIAL

DISTANCE FROM IMPORTANT BUILDING: _____

TYPE OF CONTAINER: _____

DISTANCE FROM PROPERTY LINE: _____

TANK CAPACITY: _____

DISTANCE FROM SOUCES OF IGNITION: _____

NUMBER OF CONTAINERS: _____

DISTANCE FROM STORED COMBUSTIBLES: _____

DISTANCE FROM OTHER FLAMMABLE LIQUIDS: _____

NOTES: _____

SITE PLAN