



Town of Granville
Granville Fire Department

P.O. Box 247
Granville, MA 01034



APPLICATION and PERMIT
FOR STORAGE OF LIQUIFIED PETROLIUM GAS
M.G.L. CHAPTER 148, SECTION 10A

APPLICANT MUST COMPLETE

Date: _____

FDID: 13112 Fee: \$ 40.00

Application is hereby made by _____

For permit for _____, _____ gallon LPG storage tank(s) totaling _____ aggregate gals.
(QTY) (CAPACITY EACH) (TOTAL AGGREGATE GALS)

Installation Address _____ Granville, MA 01034

Above Ground Underground Dig Safe # Trench Permit #

LPG Use: Heat Hot Water Cook Stove Dryer Generator

Supply Line: Existing New Tank Owner: Property Owner Propane Supplier

Tank(s) Manufacturer and Type _____

Installing Company _____

Name of Installer _____

Certification Number _____ Expiration _____

I, the undersigned certify that the installation of Liquefied Petroleum Gas storage equipment has been made in accordance with M.G.L. c. 148 and 527 CMR 6.00 currently in effect. Furthermore, this installation has been tested in accordance with such requirements, is now in proper operating condition and complete instructions as to its use and maintenance have been furnished to the person for whom the installation (or alteration) was made.

Installer Signature _____ Phone _____

PERMIT

Once signed by the Fire Department Official, this is a PERMIT for the storage of Liquefied Petroleum Gas

Fee Paid Y N Date Paid _____ Check Number _____ Permit Number _____

This permit will expire: Upon tank removal or failure of re-inspection; or Date: _____

Permit Granted By _____ Date: _____
(FIRE DEPARTMENT SIGNATURE AND TITLE)

ORIGINAL COPY TO BE RETAINED BY FIRE DEPARTMENT AS APPLICATION. DUPLICATE/PHOTOCOPY TO BE ISSUED AS PERMIT.

THIS PERMIT MUST BE CONSPICUOUSLY POSTED UPON THE PREMISES