



Tank Permit Application

Town of BROOKLINE, NEW HAMPSHIRE

[ ] Residential [ ] Commercial/ Industrial

Building Department Fire Department Brookline, NH 03033

Fee: \$35.00

Permit # \_\_\_\_\_ - \_\_\_\_\_

Phone (603) 672-8531 Fax (603) 672-8538

Fuel Storage / Tank Permit

Is this lot with the Shoreline Protection Zone Y N

INSTALLATION/REMOVAL of FUEL STORAGE

The undersigned hereby applies for a permit to install fuel storage equipment in compliance with R.S.A. 153:5 and N.F.P.A. Standard # 31

Date: \_\_\_\_\_ Lot: \_\_\_\_\_ Job Location: \_\_\_\_\_

Owner and / or Tenant: \_\_\_\_\_

Excavation contractor: \_\_\_\_\_ Address: \_\_\_\_\_

Contact Person for Inspection: Name \_\_\_\_\_ Tel. \_\_\_\_\_

Fuel: Gas LP [ ] Natural [ ] Oil [ ] Kerosene [ ] Solid Fuel (Wood / Coal) [ ]

Tank Size: \_\_\_\_\_ in Ground [ ] Above Ground [ ]

Tank Disposal Site: \_\_\_\_\_

The undersigned hereby applies for a permit to install fuel storage/tanks as per: 53:5 and N.F.P.A. Standard # 31 Note: Sketch of tank location use reverse side

Description of work: \_\_\_\_\_

Signature \_\_\_\_\_ Fee: \_\_\_\_\_ [ ] Cash [ ] Check # \_\_\_\_\_

Installer/Remover \_\_\_\_\_ Lic # \_\_\_\_\_ Business Name \_\_\_\_\_

Address \_\_\_\_\_ City / Town \_\_\_\_\_ Tel # \_\_\_\_\_ Alt # \_\_\_\_\_

Town of Brookline codes, International Fuel Gas code, NFPA 52 Compressed Natural Gas code, NFPA 54 National Fuel Gas code, NFPA 31 National Oil Burning All work will be in compliance with one or more of the following codes :State (State Fire Code (Fir 602 and SAF-C 6012) as Adopted by the State Fire Marshal) and Equipment code, NFPA 211 Chimney, Fresh Air Vent, Fireplace, and Solid Fuel Appliance code, NFPA 121-2.32 Emergency Shut Off code, CABO Code, 1995 Edition Chpt.10.

\* Inspection Services Approval \_\_\_\_\_ Date \_\_\_\_\_

When signed below by the Fire Chief or Designee, this application is a:

Place payment below this line and copy for receipt

TEMPORARY PERMIT Authorizing the above installation

Fire Chief or Designee \_\_\_\_\_ Date \_\_\_\_\_

Certificate of Compliance

Permission is hereby granted to operate the above equipment / appliances in compliance with State Codes adopted by the State Fire Marshal office and Town of Brookline Codes

Fire Chief or Designee \_\_\_\_\_ Date \_\_\_\_\_

White Copy FD - Applicant/Receipt Copy Salmon - File Copy Blue