



NOTICE OF INSTALLATION OF LIQUEFIED PETROLEUM GAS TANK

OFFICE OF STATE FIRE MARSHAL
OREGON STATE POLICE
(503) 934-8274
TDD Line: (503) 390-4661
Fax: (503) 373-1825

Tank No: _____

OSFM OFFICE USE ONLY

SUMMARY SHEET AND FEES TO ACCOMPANY THIS NOTICE.

Customer: _____ Customer Phone: _____

Customer Mailing Address: _____

City: _____ County: _____ State: _____ Zip: _____

Street Address of Tank: _____

City: _____ County: _____ State: _____ Zip: _____

Date Tank Installed: _____ Water Capacity/Gallons: _____ Serial Number: _____

Make of Tank: _____ Year Built: _____ Code Const: _____

Company Installing Tank: _____ Company License No: _____

Signature of Installing Fitter: _____ Fitter License No: _____

Check One: Customer Owned Tank Tank Owned by LPG Company

Check One: Aboveground Underground*

* Complete Underground LPG Tank Installation Worksheet for each tank installed underground. Attach form to this notice before sending to OSFM.

Is the site location located in a floodplain or high water location? Yes* No

*If yes, is the tank secured according to NFPA 58 requirements? Yes No

REQUIRED: CREATE SITE MAP GIVING DETAILED DIRECTIONS TO THE TANK LOCATION

GPS Coordinates (if available): Latitude _____ Longitude _____

NOTE: The State Fire Marshal shall be notified by the last day of each month by the installing company of all new LPG tank installations made during the preceding month. Date of notification shall be determined by US Post Office postmark.