



## NOTICE OF INSTALLATION OF LIQUEFIED PETROLEUM GAS TANK

Oregon State Fire Marshal  
Regulatory Services Division  
LPG Program  
3991 Fairview Industrial Drive SE,  
Salem, OR 97302  
Email: [OSFM.LP@OSFM.oregon.gov](mailto:OSFM.LP@OSFM.oregon.gov)

Tank No: \_\_\_\_\_

OSFM OFFICE USE ONLY

SUMMARY SHEET AND FEES TO ACCOMPANY THIS NOTICE.

PLEASE PRINT OR TYPE.

**INFORMATION MUST BE LEGIBLE.**

Customer: \_\_\_\_\_ Customer Phone: \_\_\_\_\_

Customer Mailing Address: \_\_\_\_\_

Customer Email 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: \_\_\_\_\_ ☐ ASME ☐ DOT

Check One: ☐ Residential ☐ Commercial

Check One: ☐ Aboveground ☐ Underground\*

Check One: ☐ Customer Owned Tank ☐ Tank Owned by LPG Company

\* 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

Company Installing Tank: \_\_\_\_\_ Company License No: \_\_\_\_\_

**INSTALLING FITTER-** PRINTED NAME: \_\_\_\_\_

SIGNATURE : \_\_\_\_\_ Fitter License No: \_\_\_\_\_

**REQUIRED:** SITE MAP WITH DETAILED DIRECTIONS TO TANK WITH NEAREST CROSS STREET.

GPS Coordinates: 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.