



# MISSION FIRE DEPARTMENT FIRE MARSHAL'S OFFICE

415 W. Tom Landry Avenue, Mission, TX 78572  
Telephone: 929-580-8711 Fax: 956-580-8712

## ABOVEGROUND/UNDERGROUND STORAGE TANK PERMIT APPLICATION Form must be completed on each tank.

DATE: \_\_\_\_\_ PERMIT NUMBER: \_\_\_\_\_

LOCATION: \_\_\_\_\_ TANK CONTENTS: \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

PROPERTY OWNER: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

<b>METHOD OF STORAGE:</b>	<b>TANK CONSTRUCTION:</b>	<b>TANK SERIAL # :</b>	<b>TANK SIZE (GAL)</b>
ABOVEGROUND: _____	STEEL: _____	_____	_____
UNDERGROUND: _____	FIBERGLASS: _____	_____	_____
DRUMS: _____	STEEL/FIBERGLASS: _____	_____	_____
OTHER: _____	CONTAINMENT: _____	YES or NO _____	_____

<b>PIPING CONSTRUCTION:</b>	<b>TANK INFORMATION:</b>	<b>INSTALLATION :</b>
STEEL: _____	MAKE/MODEL: _____	PERMANENT: _____
FIBERGLASS: _____	MANUFACTURE DATE: _____	TEMPORARY: _____
PROTECTED STEEL: _____		• TOTAL DAYS: _____

TANK INSTALLED BY: \_\_\_\_\_ LICENSE NO.: \_\_\_\_\_

ON SITE SUPERVISOR: \_\_\_\_\_ TELEPHONE: (24 HOUR) \_\_\_\_\_

COMPANY ADDRESS: \_\_\_\_\_

	<b>DATE:</b>	<b>INSPECTOR:</b>
Tank Removal Observations:	_____	_____
Tank Hole Inspection:	_____	_____
Tank Site Installation Inspection:	_____	_____
Further Requirements:	_____	_____
Closure Date:	_____	_____

Detailed Closure Booklet-To Include All of the Following:  
1. T.N.R.C.C. Notification, Closure Form, and Letter of Completion. 2. Disposal Receipts, 3. Analytical Test Results, 4. Project Scope

**COMMENTS:** \_\_\_\_\_

**Signature of Applicant:** \_\_\_\_\_

**Signature of Fire Marshal (or Representative)** \_\_\_\_\_

**\*\*\*\*\* OFFICE USE ONLY \*\*\*\*\***

PERMIT #: \_\_\_\_\_ DATE ISSUED: \_\_\_\_\_ FEE: \$ \_\_\_\_\_

CHECK #: \_\_\_\_\_ PERMIT ISSUED BY: \_\_\_\_\_

REVIEWER NOTES: \_\_\_\_\_