City of Lake Worth Permit Department 3805 Adam Grubb Lake Worth, Texas 76135 817-237-1211 x112

Fax 817-237-1333



FUEL TANK INSTALLATION/REMOVAL PERMIT APPLICATION

Date:						
Permit Address:						
Current Legal Description:	Block/Abstract:	Lot/Tract:	: Addition/Survey:			
		TENANT / LEASEI	E INFORMATION			
Company Name:			Contact:			
Address:			City:	State:	Zip:	
Phone:	hone: Fax:		Email:			
		PROPERTY OWNE	R INFORMATION			
Company Name:			Contact:			
Address:			City:	State:	Zip:	
Phone:		Fax:		Email:		
		FIRE CONTRACTO	OR INFORMATION	I		
Company Name:				Contact:		
Address:			City:	State:	Zip:	
Phone:		Fax:		Email:		
		PERMIT INF	ORMATION			
Property Use:			Construction V	alue:		
I have the owner	Residential r's consent to perform VES	Commercial this work? NO	What is building used for?			
Please indicate t	the size and number of		Please indicate the size and number of tanks being removed:			
Type of work: New Addition Alteration Demolition Briefly describe work to be done:						
		DEDMIT ACKNO				
TOI 1		PERMIT ACKNO				
within 180 days of is upon written docum Only one extension I hereby certify th this type of work wil	issued, expires by limitation strange. The authority having tentation by the permitee of will be allowed. I understan at I have read and examined the lace of the complied with whether sper state or local law regulating	g jurisdiction shall be permit a satisfactory reason for f and that all permits requi his application and know the pecified herein or not. The g	ted to grant an extension address to start or compare a final inspection as same to be true and congranting of a permit doe	on of the permit time period plete the work or activity rrect. All provisions of laws	for an additional 180 days authorized by the permit. s and ordinances governing	
Applicant Signature:			Date:			
Printed Name:			Application Received By:			

	SUBMITTAL I	NFORMATION						
Residential Project – 3 complete sets of plan	as submitted?	П	Yes No N/A					
Commercial Project – 4 complete sets of pla	ans submitted?		Yes No N/A					
Square Footage of building/lease space?		Number of Stories?	10 _ 101					
Type of Construction?		Occupancy Group?						
Division?		Occupancy Load?						
Property Zoning?		Property Platted?						
Any Non-Conforming Uses?		If yes, please describe:						
SUBMITTAL DATE INFORMATION								
1 st submittal date:		2 nd submittal date:						
3 rd submittal date:		submittal date:						
REQUIRED APPROVAL SIGNATURES								
Permit application and p	plans have been re	eviewed and are	released for construction.					
FIRE DEPARTMENT EMPLOYEE SIGNATURE PRINTED NAME		ATURE	APPROVAL DATE					
PAYMENT INFORMATION								
Fee: \$	Date Paid:		Receipt #:					
Permit Filing Date:	Permit Expiration	Date:	Completion Date:					
Comments/Notes:								

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