



**El Reno Fire Department**  
**Hazardous Material**  
**Permit**  
**Application**

File #:	
Total Square Foot:	
Fee \$.07 x FT <sup>2</sup> + 4.00(Minimum fee- 204.00):	
Date:	Date Paid:

This form must be filled out completely. Plan review will be on hold until fee has been paid in full. Please contact the Fire Marshal's Office with any questions at (405)262-2949.

**Provide three sets of Hazardous Material Plans with Permit Application.**

**2707 Faith Avenue. El Reno. OK 73036**

**PROPERTY INFORMATION**

Building Name:	
Building Address:	
Owner's Name:	
Owner's Address:	Owner's Phone Contact:
Owner's Email :	Owner's Fax:

**SYSTEM DESIGNER/CONTRACTOR**

Company Name:	
Company Address:	
Contact Person (Designer):	
Phone #:	Email:

Hazardous Material (as defined by the International Fire Code):	
<input type="checkbox"/> LPG <input type="checkbox"/> Cryogenic <input type="checkbox"/> Flammable and Combustible Liquids <input type="checkbox"/> Spraying or Dipping <input type="checkbox"/> Compressed Gas	
<input type="checkbox"/> Yes   Provide 3 sets of plans or requirements below.	
<input type="checkbox"/> Yes <input type="checkbox"/> N/A   Provide specifications on tanks.	
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A   Provide MSDS of all materials being stored.	

**PART 2**

A. **FACILITY STORAGE MAP** - Provide one or more maps of the storage facility that show the following:

1. **SITE PLAN** - provide a site plan showing the location of all buildings, structures, chemical loading areas, parking lots, and internal roads. Indicate the approximate scale or dimensions, northern direction, and the date the drawing was completed.
2. **BUILDING FLOOR PLANS** – If stored inside, provide a floor plan for each building where hazardous materials are stored and/or used. Show approximate scale or dimensions, and northern direction. Mark each hazardous material storage/use location with a name, letter, or number code of your choice. The location code must be included on the inventory statement per the instructions below. The map should also show accesses to each storage area, the location of emergency equipment, secondary containment areas, purpose of other areas in the facility, and location of aboveground and underground tanks (sumps, pumps, vaults, etc.)

**Designer**

I certify that the information provided in this document is true and accurate.

\_\_\_\_\_  
(Printed Name)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Company Name)

\_\_\_\_\_  
License Stamp

\_\_\_\_\_  
(Email and Phone Contact)

**Mailing Information**

I will pick up the plans.

Please return using third party carrier: (FedEx/ UPS etc.)

Provide a properly filled out return label must be provided to our office with this transmittal.