

Permit #	_____
Loc #	_____
Date	_____

INTENT TO INSTALL COMPRESSED NATURAL GAS VEHICLE FUEL FACILITY

☐ **EXPEDITE REVIEW. ADDITIONAL FEE SUBMITTED.**

Owner Information	Name _____ Mailing address _____ City _____ State _____ ZIP code _____ Phone _____ Fax _____ Email _____
Location Information	Location name _____ Physical address _____ City _____ State PA ZIP code _____ County _____ Municipality name _____ Type: ☐ Borough ☐ City ☐ Township
Applicant Information	Name _____ Mailing address _____ City _____ State _____ ZIP code _____ Phone _____ Fax _____ Email _____ By signing this form, I acknowledge my understanding that approval of this installation is contingent upon compliance with all of the requirements (including any related to financial responsibility) of the Combustible and Flammable Liquids Act (35 P.S. §§ 1241-1252), the Flammable and Combustible Liquids Regulations (37 Pa. Code §§ 11.1-14.8), the Boiler and Unfired Pressure Vessel Law (35 P.S. §§ 1331.1-1331.21) and the Boiler and Unfired Pressure Vessel Regulations (34 Pa. Code §§ 3a.1-3a.171) and that a site inspection and final approval issued by the Department of Labor & Industry is required prior to use of this installation. I further acknowledge that if any part of the proposed installation is not in compliance with the applicable regulations, I must submit a request for variance (Form LIIB-121) prior to installation and await a decision of the Industrial Board regarding my request. This installation may require additional registration, permitting and or inspection by the Pennsylvania Public Utility Commission. You as the applicant are responsible for ensuring compliance with all state laws and regulations relating to the type of installation, service and operation of the equipment. PUC contact information may be found at www.puc.state.pa.us. _____ _____ _____ Applicant Name (Printed) Applicant Signature Date
Application Type	☐ New location ☐ Existing location If application applies to an existing location, please indicate file numbers, location numbers or permit numbers that have been issued by the Department of Labor & Industry: _____
Use of Installation	☐ Attended self-service ☐ Fleet fueling ☐ Unattended self-service ☐ Other
<i>For L&I Use Only</i>	Check #: _____ Amount: \$ _____ Bates #: _____

Compressors	<table border="0"> <tr> <th data-bbox="342 128 609 184">Existing (E), New (N), To-Be-Removed (R)</th><th data-bbox="609 128 899 184">Quantity</th><th data-bbox="899 128 1240 184">Make</th><th data-bbox="1240 128 1516 184">Model</th></tr> <tr> <td>☐ E ☐ N ☐ R</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr> <td>☐ E ☐ N ☐ R</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr> <td>☐ E ☐ N ☐ R</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr> <td>☐ E ☐ N ☐ R</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr> <td>☐ E ☐ N ☐ R</td><td>_____</td><td>_____</td><td>_____</td></tr> </table>	Existing (E), New (N), To-Be-Removed (R)	Quantity	Make	Model	☐ E ☐ N ☐ R	_____	_____	_____	☐ E ☐ N ☐ R	_____	_____	_____	☐ E ☐ N ☐ R	_____	_____	_____	☐ E ☐ N ☐ R	_____	_____	_____	☐ E ☐ N ☐ R	_____	_____	_____						
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Storage Vessels	<table border="0"> <tr> <th data-bbox="342 476 609 533">Existing (E), New (N), To-Be-Removed (R)</th><th data-bbox="609 476 850 533">Quantity</th><th data-bbox="850 476 1078 533">Capacity (gallons)</th><th data-bbox="1078 476 1305 533">Make</th><th data-bbox="1305 476 1516 533">Model</th></tr> <tr> <td>☐ E ☐ N ☐ R</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr> <td>☐ E ☐ N ☐ R</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr> <td>☐ E ☐ N ☐ R</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr> <td>☐ E ☐ N ☐ R</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr> <td>☐ E ☐ N ☐ R</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> </table>	Existing (E), New (N), To-Be-Removed (R)	Quantity	Capacity (gallons)	Make	Model	☐ E ☐ N ☐ R	_____	_____	_____	_____	☐ E ☐ N ☐ R	_____	_____	_____	_____	☐ E ☐ N ☐ R	_____	_____	_____	_____	☐ E ☐ N ☐ R	_____	_____	_____	_____	☐ E ☐ N ☐ R	_____	_____	_____	_____
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Dispensers (All dispensers must be listed)	<table border="0"> <tr> <th data-bbox="342 825 609 882">Existing (E), New (N), To-Be-Removed (R)</th><th data-bbox="609 825 899 882">Quantity</th><th data-bbox="899 825 1240 882">Make</th><th data-bbox="1240 825 1516 882">Model</th></tr> <tr> <td>☐ E ☐ N ☐ R</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr> <td>☐ E ☐ N ☐ R</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr> <td>☐ E ☐ N ☐ R</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr> <td>☐ E ☐ N ☐ R</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr> <td>☐ E ☐ N ☐ R</td><td>_____</td><td>_____</td><td>_____</td></tr> </table>	Existing (E), New (N), To-Be-Removed (R)	Quantity	Make	Model	☐ E ☐ N ☐ R	_____	_____	_____	☐ E ☐ N ☐ R	_____	_____	_____	☐ E ☐ N ☐ R	_____	_____	_____	☐ E ☐ N ☐ R	_____	_____	_____	☐ E ☐ N ☐ R	_____	_____	_____						
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Mandatory Documents	☐ ASME storage vessels require National Board registration. (U1A must be provided at time of inspection.) ☐ Provide documentation that gas supplier has been notified of intent. ☐ Provide three site plans of location indicating all buildings, LPG and Flammable and Combustible Liquid equipment, and property lines on paper sized at minimum of 11 in. X 17 in.																														
Filing Requirements	FEE SCHEDULE: For an up-to-date listing of fees, please see the Fee Schedule listed on our website (www.dli.pa.gov/Individuals/Labor-Management-Relations/bois) or contact our office for a copy of the Fee Schedule by email BOILERS@pa.gov, by telephone at (717) 787-3806 option 3 or by fax at (717) 705-7262. Submit all mandatory documents and payment by check or money order payable to Commonwealth of Pennsylvania along with this application to: PA Department of Labor and Industry BOIS – Boiler Division 651 Boas Street, Room 1606 Harrisburg, PA 17121																														