

PERMIT # _____

DATE _____

SK1

FLAMMABLE & COMBUSTIBLE LIQUIDS INDUSTRIAL BOARD PETITION

Type or print legibly all requested information. If additional space is required, attach a separate 8-1/2"x11" sheet.

☐ Expedited Review

Petitioner	Contact person _____ Company name _____ Street address _____ City _____ State _____ ZIP code _____ Phone _____ Fax no. _____ Email address _____
Owner	Owner _____ Street address _____ City _____ State _____ ZIP code _____
Installation Information	Location name _____ Street address _____ City _____ ZIP code _____ County _____ Municipality _____ Type: <input type="checkbox"/> Borough <input type="checkbox"/> City <input type="checkbox"/> Township
Use of Installation	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"><input type="checkbox"/> Aircraft fueling</div> <div style="width: 33%;"><input type="checkbox"/> Attended self-service</div> <div style="width: 33%;"><input type="checkbox"/> Bulk storage</div> <div style="width: 33%;"><input type="checkbox"/> CNG</div> <div style="width: 33%;"><input type="checkbox"/> Ethanol</div> <div style="width: 33%;"><input type="checkbox"/> Fleet fueling</div> <div style="width: 33%;"><input type="checkbox"/> Fuel oil storage</div> <div style="width: 33%;"><input type="checkbox"/> Marine fueling</div> <div style="width: 33%;"><input type="checkbox"/> Unattended self-service</div> <div style="width: 33%;"><input type="checkbox"/> Other (specify): _____</div> </div>
Request For Variance(s)	Detail variance(s) that are being sought (including clearance distances). List specific sections of the appropriate regulations from which variances are being requested. _____ _____ _____
Variance Justification	Provide justification for this request, including any compensatory features that will increase safety. _____ _____ _____
Extension of Time Request	Detail the reasons for this request. Specify length of extension requested or completion date. A copy of the deficiency notice issued by the Boiler Division MUST be submitted with this petition. _____ _____ _____
IND. BD USE ONLY	Check # _____ Amount \$ _____ Bates # _____

Appeal	<p>Inspector _____ Date of decision _____</p> <p>Check which of the following form the basis for your appeal:</p> <p>The true intent of the Combustible and Flammable Liquids Act (CFLA) was incorrectly interpreted. <input type="checkbox"/></p> <p>The provisions of the CFLA do not apply to this installation. <input type="checkbox"/></p> <p>Other: Please explain. <input type="checkbox"/></p> <p>Detail the grounds for appealing this decision, citing provisions of the CFLA, or explaining how your variance would be equivalent to that specified in the CFLA.</p> <p>_____</p> <p>_____</p>
Filing Requirements	<p>Submission requirements shall be as follows:</p> <ol style="list-style-type: none"> 1. One copy of the completed Flammable & Combustible Liquids Industrial Board Petition (LIIB-121). 2. One copy of the completed Flammable & Combustible Liquids Intent to Install (LIBI-703). 3. One copy of the completed Intent to Install Tanks/Pumps/Dispensers (LIBI-708). 4. If installing an attended, self-service fueling station, one copy of a completed Attended Self-Service Station (LIBI-700) 5. If the installation involves Ethanol-85% tanks and related equipment, one copy of a completed E-85 Installation (LIBI-706) and E-85 Certification Form (LIBI-707). 6. A site plan including the following information: <ul style="list-style-type: none"> • Location of all tanks. • Sizes of all tanks. • Location of any buildings or structures. • Distances from all tanks to any buildings or structures. • Distances from all tanks to the property lines. • Vehicle protection (bollards). • Traffic flow patterns. • Lines of sight when the installation is at an attended self-service site, including camera usage, if applicable. 7. If requesting a variance regarding distance to a property line, a letter from adjacent property owners stating their approval of the installation distance must be submitted. 8. Check or money order made payable to "Commonwealth of Pennsylvania" <p>Fee Schedule: Variance/Extension of Time Request/Appeal.....\$321 (per building) Expedited Review..... Additional \$1000 (per building)</p> <p>Contact the Industrial Board at 717-787-6114 for questions or concerns.</p> <p>Mail the complete submission package to:</p> <p style="text-align: center;">Department of Labor & Industry Industrial Board 651 Boas Street, Room 1622 Harrisburg, PA 17121-0750</p> <p>NOTE: If additional requests are needed after this petition is filed, you must submit these requests on a separate petition, along with an additional \$321 petition fee.</p>
Petitioner Signature	<p>_____ (_____) _____ - _____</p> <p style="text-align: center;">Petitioner signature Telephone number</p>

*Auxiliary aids and services are available upon request to individuals with disabilities.
Equal Opportunity Employer/Program*