

BENSALEM TOWNSHIP

Fire Marshal's Office



Office (215) 633-3617 • Fax (215) 633-3662 For Inspections Call (215) 633-3644

Tank Installation/Removal Permit Application		Permit Number: Date Issued: Revision Date:	
Owner:	Contractor:	CERTIFICATION IN LIEU OF OATH:	
Address:	Address:	(Complete for Minor Work and Small Job Only)	y)
		I hereby certify that the proposed work is authorized by the owner of record and I have been authorized	
Telephone:	Telephone No.:	by the owner to make this application as his agen	ent.
Work Site Address:	License No.:		
WHEN CHANGING CONTRACTO	ORS YOU MUST NOTIFY THI	IS OFFICE Agent Signature	
	INSTALLATION INFORMA	ATION	
Approximate Installation Date		Check One	
Number of Tank(s) Installed		Underground	
Construction if Tank(s) Installed			
Capacity of Tank(s) Installed		Aboveground	
Contents of Tanks(s) Installed			
	REMOVAL INFORMATI	ION	
Approximate Removal Date		Check One	
Number of Tank(s) Removed		Underground	
Construction if Tank(s) Removed			
Capacity of Tank(s) Removed		Aboveground	
Contents of Tanks(s) Removed			
Is removal of tank prompted to	by knowledge of a leak?	Yes No	
During Installation/Removal – i	if a leak is discovered contac	ct the Fire Marshal's Office IMMEDIATELY	
	FOR OFFICE USE ONLY	Υ	
Reviewer's Signature:	Date	Permit Cost \$	
Inspection Date:	Pass Fail	Inspector's Signature:	
Reviewer's Comments:			