

FILE # _____

DATE _____

LOC. # _____

LIQUEFIED PETROLEUM GAS 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. ADDITIONAL FEE SUBMITTED.

Petitioner	Contact person _____ Company name _____ Street address _____ City _____ State _____ ZIP code _____ Phone _____ Fax no. _____ Email address _____
Owner of Tank/Cylinder	Owner _____ Street address _____ City _____ State _____ ZIP code _____
Installation Information	Location name _____ Street address _____ City _____ ZIP code _____ County _____ Municipality _____ Type: Borough <input type="checkbox"/> City <input type="checkbox"/> Township <input type="checkbox"/>
Installation Types	Aboveground <input type="checkbox"/> Underground <input type="checkbox"/> Cylinder exchange cabinet <input type="checkbox"/> Dispensing station/ Vehicle fueling <input type="checkbox"/> Industrial <input type="checkbox"/> Other (specify): <input type="checkbox"/> Bulk <input type="checkbox"/> _____
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	Date received: _____ Check #: _____ Bates #: _____

<p>Appeal</p>	<p>BOIS inspector _____ Date of decision _____</p> <p>Check which of the following form the basis for your appeal:</p> <p>The true intent of the Propane and Liquefied Petroleum Gas Act (PLPGA) was incorrectly interpreted. <input type="checkbox"/></p> <p>The provisions of the PLPGA do not apply. <input type="checkbox"/></p> <p>Other: Please explain. <input type="checkbox"/></p> <p>Detail the grounds for appealing this decision, citing provisions of the PLPGA, or explaining how your variance would be equivalent to that specified in the PLPGA.</p>
<p>Filing Requirements</p>	<p>Submission requirements shall be as follows:</p> <ol style="list-style-type: none"> One copy of the completed Liquefied Petroleum Gas Industrial Board Petition (LIIB-122). <ul style="list-style-type: none"> A separate request must be submitted for each installation that requires a variance. One copy of the completed Liquefied Petroleum Gas Application for Registration and Plan Approval (LIBI-801). Three sets of plans on paper not less than 18" x 24" for any of the following: <ul style="list-style-type: none"> Tanks over 2,000-gallon individual water capacity. Fixed location with aggregate capacity exceeding 4,000 gallons. Exchange cabinets. Dispensing stations to fill cylinders/fuel vehicles. Plans must include the following information: <ol style="list-style-type: none"> Location of all tanks. Size of all tanks including ASME data reports for tanks. Distances from all buildings/property lines. Fencing (fence around tanks) when required. Traffic flow patterns. Fire protection provided. Vehicle protection (bollards, jersey barriers, etc.). Fire Safety Analysis if required by Section 6.25 of NFPA-58 (2008). A Manufacturer's Data Report (U1-A) for all ASME Tanks or a PA Special/PA Standard #. Two separate checks or money orders made payable to the "Commonwealth of Pennsylvania" <ul style="list-style-type: none"> One for the variance appeal or extension of time in the amount of \$336.65 per location. One for the plan approval and registration. <p>Fee Schedule:</p> <p>Variations/Appeals/Extension of Time Requests..... \$336.65 (per location)</p> <p>Expedited Review of petition.....Additional \$1048.74 (per location)</p> <p>Plan Approval/Registration..... Refer to the LPG fee schedule.</p> <p>Contact the Industrial Board at 717-787-6114 or RA-LIINDUSTRIALBOARD@pa.gov 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>Petitioner Signature</p>	<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*