

Permit # _____

Date: _____

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. ADDITIONAL FEE SUBMITTED.

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 _____ State _____ ZIP code _____ County _____ Municipality _____ Type: <input type="checkbox"/> Borough <input type="checkbox"/> City <input type="checkbox"/> Township
Use of Installation	<input type="checkbox"/> Aircraft fueling <input type="checkbox"/> Attended self-service <input type="checkbox"/> Bulk storage <input type="checkbox"/> CNG <input type="checkbox"/> Ethanol <input type="checkbox"/> Fleet fueling <input type="checkbox"/> Fuel oil storage <input type="checkbox"/> Marine fueling <input type="checkbox"/> Unattended self-service <input type="checkbox"/> Other (specify): _____
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 <u>MUST</u> be submitted with this petition.
IND. BD USE ONLY	Date received: _____ Check #: _____ Bates #: _____

<p>Appeal</p>	<p>Inspector _____ Date of decision _____</p> <p>Check which of the following form the basis for your appeal:</p> <p><input type="checkbox"/> The true intent of the Combustible and Flammable Liquids Act (CFLA) was incorrectly interpreted.</p> <p><input type="checkbox"/> The provisions of the CFLA do not apply to this installation.</p> <p><input type="checkbox"/> Other: Please explain.</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>Filing Requirements</p>	<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." All fees paid to the Industrial Board must be separate from any fees paid to the Bureau of Occupational and Industrial Safety. <p>Fee Schedule: Variance/Extension of Time Request/Appeal.....\$328.06 (per building) Expedited Review..... Additional \$1022 (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 \$328.06 petition fee.</p>
<p>Petitioner Signature</p>	<p>_____</p> <p style="text-align: center;">Petitioner signature</p> <p style="text-align: right;">_____</p> <p style="text-align: right;">Telephone number</p>

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