



Division of the State Fire Marshal
118 Parade Street
Providence, RI 02909
Phone: 401-462-4200 Fax: 401-462-4250

Permit # _____

Date: _____

**APPLICATION FOR STORING, HANDLING OR DISPENSING
LIQUEFIED PETROLEUM GAS**

NAME OF FIRM: _____

BUSINESS ADDRESS: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

OWNER: _____

HOME ADDRESS: _____

HOME PHONE: _____ BUSINESS _____

Number of tanks: _____ Capacity of tanks: _____

Signature

Title

Fee: \$75.00 Check # _____

Payable to: R.I. State Fire Marshal

PERMIT EXPIRES: