

**City of Livingston  
Livingston Fire Rescue  
Permit Application  
Liquid Petroleum Gas Tank Installations**



JOB ADDRESS: \_\_\_\_\_

BUSINESS OR PROJECT NAME: \_\_\_\_\_

**CONTRACTOR OR COMPANY**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY/STATE \_\_\_\_\_ ZIP \_\_\_\_\_

BUSINESS PHONE # ( ) \_\_\_\_\_

FAX # ( ) \_\_\_\_\_

CELL PHONE # ( ) \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

DESCRIPTION OF WORK TO BE DONE: **Set Propane Dispenser**

IS YOUR COMPANY CURRENTLY REGISTERED WITH THE CITY? Yes No N/A

COMPANY STATE LICENSE # \_\_\_\_\_

INSTALLATION OF LIQUID PETROLEUM GAS TANKS

TOTAL PERMIT FEE \$ **250.00**

CONTRACTOR TO SUBMIT ONE SET OF PLANS FOR REVIEW.

NFPA 58 Codes submitted? Yes No

I HEREBY CERTIFY THAT THE PLANS SUBMITTED ARE COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND THAT SAID WORK WILL BE DONE IN COMPLIANCE WITH THE INFORMATION HEREIN SET FORTH AND IN COMPLIANCE WITH THE CITY OF LIVINGSTON CODE OF ORDINANCES, STATE RULES AND REGULATIONS AND POLICY STANDARDS AS SET FORTH BY THE FIRE CHIEF.

SIGNED:

\_\_\_\_\_

CONTRACTORS MONTANA DL# \_\_\_\_\_ N/A \_\_\_\_\_

PRINT NAME CLEARLY \_\_\_\_\_ EXP. DATE. \_\_\_\_\_

APPROVED BY: \_\_\_\_\_

Fire Chief

**FOR OFFICE USE ONLY**

Date Submitted: \_\_\_\_\_ Permit Number: \_\_\_\_\_

Total Permit Fee Due \$ \_\_\_\_\_ Paid By: [ ] Cash [ ] Check [ ] Money Order

Check # \_\_\_\_\_

Received By: \_\_\_\_\_

Receipt No: \_\_\_\_\_

Finance Clerk: Email copy of receipt to Fire Chief Initial when complete \_\_\_\_\_