



Hope Mills Fire Department

5788 Rockfish Road
 Hope Mills, NC 28349
 910-424-0948 Fax 910-424-4566

**ABOVE GROUND TANK REMOVAL
 PERMIT APPLICATION**

CONTRACTOR REQUESTING PERMIT

NAME: _____ OFFICE PHONE _____
 ADDRESS: _____ FAX _____
 CONTACT PERSON: _____ CELL _____
 E-MAIL _____ LICENSE # _____

TANK INFORMATION

LOCATION OF TANK(S) TO BE REMOVED _____
 NAME OF BUSINESS/FACILITY _____
 OWNER NAME: _____ PHONE _____
 ADDRESS: _____ FAX _____
 CONTACT PERSON: _____ CELL _____ E-MAIL _____

PERMIT INFORMATION

| UST Info | Tank #1 | Tank #2 | Tank #3 | Tank #4 | Tank #5 |
|-----------------------|---------|---------|---------|---------|---------|
| Tank Capacity | | | | | |
| Substance Stored | | | | | |
| Is Tank Regulated? | | | | | |
| Tank Constructed of | | | | | |
| Piping Constructed of | | | | | |

The undersigned hereby makes application for a permit and the inspection of all work described above and hereby agrees to comply with all building regulations and other laws applicable to the use and type of work being performed.

Signature _____ Date _____

**Make payments to Town of Hope Mills, Inspections Department, 5770 Rockfish Road, Hope Mills NC 28348 (910) 424-4555.
 Fee: \$100.00 per tank.**

Method of Payment: CASH CHECK CREDIT CARD CHARGE ACCOUNT # _____

FOR OFFICE USE BELOW THIS LINE

| | | | |
|--------------|-------|------|----------|
| Approved by: | Date: | Fee: | Permit # |
|--------------|-------|------|----------|