



HOPE MILLS FIRE MARSHALS OFFICE  
 5788 Rockfish Road  
 Hope Mills, NC 28348  
 PHONE 910-429-3397 FAX 910-424-4566

**COMMERCIAL ABOVE GROUND STORAGE TANK INSTALLATION  
 PERMIT APPLICATION**

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

TANK INFORMATION	
LOCATION OF TANK(S) TO BE INSTALLED _____	
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 \_\_\_\_\_

**Send payments to Town of Hope Mills, 5770 Rockfish Road, Hope Mills, NC 28348.  
 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 #