



Hazardous Materials Systems Permit Application



Guil-Rand Fire Department
10506 S. Main St.
Archdale NC, 27263
336-431-2512
inspections@guil-randfire.com

Construction Permit Application

Please Note: A construction permit is required to install, repair damage to, abandon, remove, place temporarily out of service, or close or substantially modify a storage facility or other area regulated as a "Hazardous Material".

What Hazardous Material do you need a Permit For:	Please Attach the Following Documents:
<input type="checkbox"/> Battery Systems <input type="checkbox"/> Compressed Gases <input type="checkbox"/> Cryogenic Fluids <input type="checkbox"/> Flammable and Combustible Liquids <input type="checkbox"/> Hazardous Materials <input type="checkbox"/> LP Gas <input type="checkbox"/> Other. _____	<ul style="list-style-type: none">• Accident Procedures• Consequence Analysis• Emergency Plan• Hazardous Materials Inventory Statement (HIMS)• Hazardous Materials Management Plan• Operating and Emergency Procedures• A Pre-Startup Safety Review• Site Plan (Include Lot Lines and Distance to Buildings)• Written Plan for Management of Change

Payment for permits will be invoiced directly to the Applicant

Additional Info:

Applicant Information:

Applicants Name:	Phone:
Applicants Address:	Name of Business:
Email Address:	Address Installed:

Occupancy Information

Address Where Permit is Needed:

<input type="checkbox"/> New Facility <input type="checkbox"/> Existing Facility	If Existing: <input type="checkbox"/> Changing Material <input type="checkbox"/> Adding Material
If new – Building Permit Number: _____	
Sq. Ft. of Property:	Fire Extinguishing Systems: <input type="checkbox"/> Full <input type="checkbox"/> Part <input type="checkbox"/> None
Sq. Ft. of Building:	Fire Alarm System: <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> None
Building Occupancy Classification(s): Examples: B,M, F, S, H	Monitored? <input type="checkbox"/> Yes <input type="checkbox"/> No Name of Monitoring Company:
Date of Certificate of Occupancy:	Code Used (Year):
Basement: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Number of Floors:	
Occupied? <input type="checkbox"/> Day <input type="checkbox"/> Night <input type="checkbox"/> Both	
Is the facility reporting hazardous material under SARA Title III Federal Requirements: <input type="checkbox"/> Yes <input type="checkbox"/> No	

DISCLAIMER

This is an application to submit for a construction permit. Submittal of this document does not guarantee a construction permit. No work can be started without the issuance of a construction permit. Work started without a permit will result in a Stop Work Order being issued and a \$500.00 violation fee.

I hereby certify that all information in this application is correct and all work will comply with the most current editions of the NC State Building Code and NC Fire Code, all other applicable state and local laws, ordinances and regulations. The Guil-Rand Fire Department Fire Marshal's Office will be notified of any changes in the approved plans and specifications for this project permitted herein.

Owner/Agent Signature _____