

# UNIFIED FIRE AUTHORITY

FIRE PREVENTION DIVISION

# HAZARDOUS MATERIALS OPERATIONAL PERMIT APPLICATION

New Permit Renewal

TYPE OF PERMIT – Storage	ge, Dispense& Use			<u>FEE</u>
Carbon Dioxide (CO <sub>2</sub> ) System used for beverage dispensing			\$230.00	
Propane tank exchange cabinet			\$230.00	
Fuel station / Body shop / Automotive repair ( $\leq$ 5,000 Sqft )			\$230.00	
Any Occ. w/ Solids ≤ 500lbs, Liquids ≤ 55gal, Gas ≤ 200cuft (Corrosives/Oxidizers ≤ 504cuft)			\$230.00	
Any Occ. w/ Solids ≥ 500lbs, Liquids ≥ 55gal, Gas ≥ 200cuft, (Corrosives / Oxidizers ≥ 504cuft)			\$350.00	
"H" Occupancy w/ Solids ≤ 500lbs, Liquids ≤ 500gal, Gas ≤ 500cuft.			\$230.00	
"H" Occupancy w/ Solids ≥ 5	500lbs, Liquids ≥ 500	ປgal, Gas ≥ 500cuft or a	iny toxic gas	\$700.00
Business Information			Dh #.	
Business Name:			Phone #:	
Business Address:				
Mailing Address:			DI "	
Applicant Name:			Phone #:	
Email Address:		•	Daniel (Omanation	
# of Employees:	Hours of Operati		Days of Operation:	
# of Shifts:	Employees per s	snift:		
	,			
Emergency Contact Information	. , .			
Emergency Contact Information	on		Home Phone:	Cell Phone:
Emergency Contact Information	. , .		Home Phone:	Cell Phone:
	on		Home Phone:	Cell Phone:
	on		Home Phone:	Cell Phone:
	on Title:			Cell Phone:
Name:	on Title:		Home Phone:	Cell Phone:
Name:  Carbon Dioxide Dispensing S	on Title:  ystem: (s):			Cell Phone:
Name:  Carbon Dioxide Dispensing S Type of CO <sub>2</sub> Storage Container	ystem: (s): em: Yes	Total Quanti		Cell Phone:
Name:  Carbon Dioxide Dispensing S Type of CO <sub>2</sub> Storage Container( CO <sub>2</sub> Leak Detection/Alarm Syst	ystem: (s): em: Yes eqft: Yes	Total Quanti No		Cell Phone:
Name:  Carbon Dioxide Dispensing S  Type of CO <sub>2</sub> Storage Container  CO <sub>2</sub> Leak Detection/Alarm Syst  Mechanical Ventilation 1 CFM/s	ystem: (s): em: Yes eqft: Yes	Total Quanti No		Cell Phone:
Name:  Carbon Dioxide Dispensing S  Type of CO <sub>2</sub> Storage Container( CO <sub>2</sub> Leak Detection/Alarm Syst Mechanical Ventilation 1 CFM/s Location of CO <sub>2</sub> Storage: (Check	ystem: (s): eem: Yes eqft: Yes k All That Apply)	Total Quanti No No	ity of CO <sub>2</sub> Gas:	Cell Phone:
Name:  Carbon Dioxide Dispensing S Type of CO <sub>2</sub> Storage Container( CO <sub>2</sub> Leak Detection/Alarm Syst Mechanical Ventilation 1 CFM/s Location of CO <sub>2</sub> Storage: (Check Indoors Outdoors	ystem: (s): em: Yes eqft: Yes k All That Apply) Enclosed Room	Total Quanti No No Above Grade	ity of CO <sub>2</sub> Gas:  Below Grade	
Name:  Carbon Dioxide Dispensing S Type of CO <sub>2</sub> Storage Container CO <sub>2</sub> Leak Detection/Alarm Syst Mechanical Ventilation 1 CFM/s Location of CO <sub>2</sub> Storage: (Check Indoors Outdoors	ystem: (s): em: Yes eqft: Yes k All That Apply) Enclosed Room	Total Quanti No No Above Grade application form, a floor	ity of CO <sub>2</sub> Gas:  Below Grade  plan and/or site plan of the	business showing
Name:  Carbon Dioxide Dispensing S Type of CO <sub>2</sub> Storage Container( CO <sub>2</sub> Leak Detection/Alarm Syst Mechanical Ventilation 1 CFM/s Location of CO <sub>2</sub> Storage: (Check Indoors Outdoors	ystem: (s): em: Yes eqft: Yes k All That Apply) Enclosed Room	Total Quanti No No Above Grade application form, a floor	ity of CO <sub>2</sub> Gas:  Below Grade  plan and/or site plan of the	business showing
Name:  Carbon Dioxide Dispensing S Type of CO <sub>2</sub> Storage Container( CO <sub>2</sub> Leak Detection/Alarm Syst Mechanical Ventilation 1 CFM/s Location of CO <sub>2</sub> Storage: (Check Indoors Outdoors  I acknowledge that in addition the location of all hazardous	on Title:  ystem: (s): eem: Yes eqft: Yes k All That Apply) Enclosed Room  on to the completed as material storage and	Total Quanti No No Above Grade application form, a floor ad use areas is required	ity of CO <sub>2</sub> Gas:  Below Grade  plan and/or site plan of the to be submitted. (See page 2)	business showing
Name:  Carbon Dioxide Dispensing S Type of CO <sub>2</sub> Storage Container CO <sub>2</sub> Leak Detection/Alarm Syst Mechanical Ventilation 1 CFM/s Location of CO <sub>2</sub> Storage: (Check Indoors Outdoors	ystem: (s): em: Yes eqft: Yes k All That Apply) Enclosed Room on to the completed as material storage and the authority will conditions.	Total Quanti No No Above Grade application form, a floor and use areas is required fluct a site inspection, if t	Below Grade  T plan and/or site plan of the to be submitted. (See page 2) the business and/or operation.	business showing 2) on does not

Permit Fee Payment Options: (Make checks payable to Unified Fire Authority)

#### **Check by Mail:**

### **Credit Card Online Payment:**

Unified Fire Authority
Attn: Accts Payable, HazMat Permits
3389 So. 900 W. SLC, UT 84119
(Include a copy of the completed form)

Unified Fire Authority Website https://unifiedfire.org/make-a-payment/

Submit the completed application and floor plan / site plan drawings to UFA Prevention Division; 4965 So. Redwood Rd, Taylorsville, Utah 84123 or Email to <a href="mailto:ufaprevention@unifiedfire.org">ufaprevention@unifiedfire.org</a>.

Applicant Signature:

Date:

## **Hazardous Materials Storage & Use Locations**

Provide an 11x17 architectural floor plan and/or civil site plan with scale and northern direction. Plans shall show the location of each storage & use area as well as the information listed below. If architectural drawings are not available, 8.5x11 sketched drawings will be accepted but must be legible and include the following information.

Identify each storage area with identification number, letter, name or symbol. Show the following:

- a. Access to each storage area.
- b. Location of emergency equipment.
- c. Emergency exits.
- d. Location where liaison will meet emergency responders and facility evacuation meeting point locations.
- e. Locations of all H occupancies, control areas and exterior storage & use areas.
- f. The general purpose of other areas within the facility.
- g. Location of all above ground and underground tanks to include sumps, vaults, belowgrade treatment systems, piping, etc.

Provide the following information in a map key or legend for each storage area:

- a. A list of all hazardous materials including wastes.
- b. Hazard class of each.
- c. The maximum quantity of hazardous materials.
- d. The type and capacity of all storage tanks in each area and indicate whether they are above or below ground.
- e. Specify the contents of each tank.
- f. List separately any radioactive, cryogens and compressed gases for each facility.
- g. Trade secret information shall be listed as specified by Federal, State and Local laws.

If you desire confidentiality for the storage and use locations, clearly label the plan "Confidential – Do Not Disclose".

For questions concerning the permit application process, permit fees, drawings or site inspections – Please contact the Hazardous Materials Program Inspectors for more information.

Kendall Perry, Program Manager kperry@unifiedfire.org 801-743-7229 office 801-205-2305 cell Troy Gundersen
tgundersen@unifiedfire.org
801-743-7251 office
385-377-7595 cell