



LP GAS TANK – TEMPORARY USE PERMIT APPLICATION

Please complete all sections of this application. An incomplete application will be returned to applicant.

PLEASE RETURN TO EITHER:

Marion Fire Station #2
3933 Katz Drive
Marion, IA 52302

Marion Building City Hall
1225 6th Avenue
Marion, IA 52302

OFFICE USE ONLY:	
Permit #: _____	Date Submitted: _____
Fee Submitted: _____	Receipt #: _____
Date Notification and plans were sent to Fire: _____	

1. APPLICANT/CONTRACTOR INFORMATION

Contractor: _____
Contact Name: _____ Contact Phone: _____
Mailing Address: _____
Contact Email Address: _____

2. GENERAL INFORMATION

Property Address: _____
Description of Work: _____

Number of Tanks: _____ Tank Size (Gallons): _____

3. TANK OWNER INFORMATION

Installer Name: _____ Installer Phone: _____
Installer Address: _____

4. SUBMITTAL INFORMATION

License Fee Enclosed (\$20.00/tank): Note: Fire Station #2 only accepts cash/check. _____ YES _____ NO
Site Plan: _____ YES _____ NO

Any questions regarding LP Gas Tank requirements and submittal documentation can be directed to the Fire Department. Please call them at 319-377-8237.