



FOR OFFICE USE ONLY
Permit #(s) _____
Date: _____

MONROE FIRE DEPARTMENT
 163 Village Court • Monroe, WA 98272
 Phone: (360) 794-7666 • Fax: (360) 794-0959
www.monroefire.org

SUBMIT TO: CITY OF MONROE PERMIT DEPARTMENT
 806 West Main Street • Monroe, WA 98272
 Phone: (360) 794-7400 • Fax: (360) 794-4007
www.ci.monroe.wa.us

COMPRESSED GASES 105.6.8 OPERATIONAL PERMIT APPLICATION

An operational permit is required for the storage, use or handling at normal temperature and pressure (NTP) of compressed gases in excess of the amounts listed in Table 105.6.8. (See Page 3)
Exception: Vehicles equipped for and using compressed gas as a fuel for propelling the vehicle.

Permit Submittal Hours Monday through Friday:

Building, Fire & Land Use permits: 9:00 am – 12:00 pm & 2:00 pm – 4:00 pm
Verify Current Fee Schedule with Permit Staff Before Submitting Application
http://www.monroefire.org/fire_marshall/forms/permit/fire_fee_schedule.pdf

THIS APPLICATION WILL NOT BE ACCEPTED WITHOUT COMPLETED SUBMITTAL REQUIREMENTS (SEE PAGE 2)

Site Address or Property Location: _____

Size of site (acre/square feet): _____

Assessor's Tax Parcel Number (14 digits): _____

Applicant: _____ Phone # (____) _____

*Signature: _____ Printed Name: _____

Mailing Address: _____ Fax # (____) _____

City _____ State _____ Zip _____ E-mail _____

Property Owner: _____ Phone # (____) _____

**Signature: _____ Printed Name: _____

Mailing Address: _____ Fax # (____) _____

City _____ State _____ Zip _____ E-mail _____

ATTACH A SEPARATE SHEET FOR ADDITIONAL PROPERTY OWNERS/ADDITIONAL ADDRESSES

Applicant:** By your signature above, you hereby certify that the information submitted is true and correct and that you are authorized by the property owner(s) to act on their behalf. *Property Owner(s):** By your signature above, you hereby certify that you have authorized the above Applicant to make application on your behalf for this application.

Is this application a **Renewal of an Existing Operational Permit?**

Yes - Complete this Page Only

No - Continue to Page 3 for Submittal Requirements

RENEWAL SECTION (Complete this section only if this application is a renewal of an existing operational permit)

Permit # of Previous Operational Permit: _____

Describe all changes in the operations or hazards covered under this permit since this Operational Permit was last issued.

No Changes since Permit was last issued

Do not complete or attach other pages. Submit pages 1 and 2 of this application as your RENEWAL application, along with current permit fees (contact Permit Department for a fee estimate). A fire inspector will contact you at your place of business to conduct an inspection of the operations or hazards covered under this permit. After a satisfactory inspection of these operations your Operational Permit will be renewed.

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Plan Check Fee: \$ _____	Permit Fee: \$ _____
Fire Plan Check Fee: \$ _____	State Fee: \$ _____

SUBMITTAL REQUIREMENTS **OPERATIONAL PERMIT – IFC 105.6.8**

**TABLE 105.6.8
PERMIT AMOUNTS FOR COMPRESSED GASES**

For SI: 1 Cubic foot = 0.02832 m³.

TYPE OF GAS	AMOUNT (Cubic feet at NTP)
Corrosive	200
Flammable (Except cryogenic fluids and liquefied petroleum gases)	200
Highly toxic	Any amount
Inert and simple asphyxiant	6000
Oxidizing (including oxygen)	504
Pyrophoric	Any amount
Toxic	Any amount

1. Indicate the gas type and quantity that is being used at this occupancy.

Type-_____ Quantity-_____

Type-_____ Quantity-_____

Type-_____ Quantity-_____

Type-_____ Quantity-_____

Type-_____ Quantity-_____

2. Indicate how the gas is going to be stored, used and handled at this occupancy.

3. Ensure that the stationary compressed gas containers, cylinders, tanks and systems are marked with the name of the gas, visible from any direction of approach.

4. Ensure that stationary containers, above-ground tanks, entrances to where materials are stored, dispensed, used or handled have hazard identification signs as specified by NFPA 704 for the specific material contained therein. Also, Rooms or cabinets containing compressed gasses shall be conspicuously labeled: "COMPRESSED GAS."
5. Ensure that the compressed gas containers, cylinders, tanks and systems are secured against accidental dislodgement and against access by unauthorized personnel.
6. Compressed gas containers, cylinders and tanks shall be secured to prevent falling caused by contact, vibration or seismic activity. Securing of compressed gas containers, cylinders and tanks shall be by one of the following methods:
 - i. Securing containers, cylinders and tanks to a fixed object with one or more restraints.
 - ii. Securing containers, cylinders and tanks on a cart or other mobile device designed for the movement of compressed gas containers, cylinders or tanks.
 - iii. Nesting of compressed gas containers, cylinders and tanks at container filling or servicing facilities or in seller's warehouses not accessible to the public. Nesting shall be allowed provided the nested containers, cylinders or tanks, if dislodged, do not obstruct the required means of egress.
 - iv. Securing of compressed gas containers, cylinders and tanks to or within a rack, framework, cabinet or similar assembly designed for such use.
Exception: Compressed gas containers, cylinders and tanks in the process of examination, filling, transport or servicing.
7. Ensure all protective caps, collars or other valve protection devices are installed on containers, cylinders and tanks when they are in storage.
8. Combustible waste, vegetation and similar materials shall be kept a minimum of 10 feet (3048 mm) from compressed gas containers, cylinders, tanks and systems.
9. Compressed gas containers, cylinders and tanks shall not be placed near elevators, unprotected platform ledges or other areas where falling would result in compressed gas containers, cylinders or tanks being allowed to drop distances exceeding one-half the height of the container, cylinder or tank.
10. Compressed gas containers, cylinders and tanks, except those designed for use in a horizontal position, and all compressed gas containers, cylinders and tanks containing non liquefied gases, shall be stored in an upright position with the valve end up.

NOTE: A FIELD INSPECTION WILL BE PERFORMED TO DETERMINE ANY ADDITIONAL REQUIREMENTS.