



MISSOURI PROPANE SAFETY COMMISSION

LP GAS INSPECTION AUTHORITY

REPORT OF ODORIZED LP-GAS RELEASE, FIRE OR EXPLOSION

2 CSR 90-10.120 After a telephonic notice is given to report an od orized LP-Gas release, fire or explosion, form MPSC-5524 is required. This report shall be properly completed and sent to the director within fourteen calendar days of the date of the incident, unless an extension is authorized by the director. Upon completion, mail to: Missouri Propane Safety Commission, 4110 Country Club Dr., Ste. 200, Jefferson City, MO 65109-0302; or fax to: 573-893-1074; or email: admin@mopropanesc.org

DATE OF REPORT	NAME OF PERSON REPORTING INCIDENT	PHONE NUMBER(S) () ()
COMPANY/EMPLOYER		TITLE (OWNER/MANAGER/OPERATOR)
DATE OF INCIDENT	TIME OF INCIDENT	COUNTY
PHYSICAL ADDRESS/CITY/ST/ZIP CODE OF INCIDENT		
PROPERTY OWNER NAME(S)		RESIDENT NAME(S)
EVENT <input type="checkbox"/> Odorized LP-Gas Release <input type="checkbox"/> Odorized LP-Gas Fire <input type="checkbox"/> Odorized LP-Gas Explosion		
CONSEQUENCES TO PERSON(S) (DEATH, INJURY, HOSPITALIZATION, ETC)		
CONSEQUENCES TO STRUCTURES/FACILITIES (FACILITY TAKE N OUT OF SERVICE, DESTRUCTION OF HOME/OFFICE, ETC)		
ESTIMATED DOLLAR AMOUNT OF DAMAGE TO THE PROPERTY OF THE OPERATOR, OTHERS, OR BOTH \$		
OTHER CONSEQUENCES (REROUTING OF TRAFFIC, EVACUATION OF BUILDINGS, MAJOR MEDIA INTERESTS, ETC.)		
EMERGENCY RESPONDER(S)		
STATE OR FEDERAL AGENCY REPORTING REQUIRED (OTHER THAN MPGC)		
OTHER SIGNIFICANT FACTS RELEVANT TO INCIDENT		