



MISSOURI PROPANE SAFETY COMMISSION
 LP GAS INSPECTION AUTHORITY

APPLICATION FOR VARIANCE

NOTE: ONE APPLICATION/FORM MUST BE SUBMITTED FOR EACH UNIT OF EQUIPMENT.

FOR MP S C OFFICE USE ONLY		
DATE	VARIANCE #	MPGC APPROVAL <input type="checkbox"/> YES <input type="checkbox"/> NO

THIS FORM MUST BE COMPLETED IN ITS ENTIRETY OR IT WILL BE RETURNED

OWNER NAME	OWNER ADDRESS	OWNER CITY, STATE, ZIP
NAME (IF DIFFERENT FROM OWNER)	MAILING ADDRESS	MAILING CITY, STATE, ZIP
LOCATION NAME	LOCATION ADDRESS	LOCATION CITY, STATE, ZIP
LOCATION COUNTY	LOCATION PHONE	NUMBER OF UNITS AT LOCATION

ACTIVITY	TYPE OF EQUIPMENT	USAGE
NEW INSTALLATION	CARGO TANK	OFFICE/GOV'T BUILDING
OTHER	OTHER	HOSPITAL/INSTITUTIONAL
		CHURCH/RELIGIOUS
		COMMERCIAL/INDUSTRIAL
		RETAIL
		SCHOOL/LIBRARY/EDUCATIONAL
		DISPENSER
		RESIDENCE
		MOTEL/HOTEL
		AGICULTURE
		NURSING/RETIREMENT HOME
		OTHER

MANUFACTURER	DATE OF MANUFACTURER	SERIAL NUMBER	CAPACITY
WORKING PRESSURE	SPECIFIC LOCATION	LAST INSPECTION DATE	

COMMENTS AND DESCRIPTION DETAIL OF INSTALLATION North ↑
 Draw plan here, or attach plan in duplicate.

WRITTEN RESPONSE REQUIRED BEFORE INSTALLATION.

SIGNATURE OF CONTACT PERSON AT LOCATION	INSPECTOR SIGNATURE
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PRINTED NAME AND TITLE OF CONTACT PERSON AT LOCATION

Return to: MISSOURI PROPANE SAFETY COMMISSION, 4110 COUNTRY CLUB DR., STE. 200, JEFFERSON CITY, MO 65109-0302
 OR FAX TO: 573-893-1074