

Building Permit No. \_\_\_\_\_

Date of Application: \_\_\_\_\_

Per Local Ordinance

# Application for REMOVAL of Underground Fuel Storage Tank Permit

Town of East Lyme Building Department, 108 Pennsylvania Avenue, Niantic, CT 06357  
Telephone: (860) 691-4114 Fax: (860) 691-0351

***Application must be filled out completely in ink***

RESIDENTIAL       COMMERCIAL       INDUSTRIAL       OTHER

**JOB LOCATION:** \_\_\_\_\_ Assessor's Map \_\_\_\_\_ Lot \_\_\_\_\_

Property Owner's Name \_\_\_\_\_

Property Owner's Address \_\_\_\_\_ TEL No. \_\_\_\_\_

Contractor's Name \_\_\_\_\_ TEL No. \_\_\_\_\_

Contractor's Address \_\_\_\_\_ City: \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

TYPE OF FUEL:

***Circle One***

Gas

Oil

LPG

Other

Size \_\_\_\_\_

*Applicant is responsible for proper handling/disposal of all removed materials*

***Applicant must call to schedule inspection***

***Note: Submit separate Fuel Tank Installation permit for replacing tank.***

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please Print Name \_\_\_\_\_ Tel. No. \_\_\_\_\_

Estimated Value of Work \$ \_\_\_\_\_

Permit Fee \$ \_\_\_\_\_

State Education Fee \$ NOT APPLICABLE

**Total Due:** \_\_\_\_\_

Approved By: \_\_\_\_\_ Date \_\_\_\_\_

*(Building Official)*