

Chemical Storage Facility Permit Application

Facility Information

Facility Name

Facility Address

City

State/Province

ZIP/Postal Code

Facility Contact Person

Contact Phone

Contact Email

Chemical Storage Details

List of Chemicals to be Stored

Total Quantity (Specify Unit)

Storage Method/Type

Container Type

Maximum Storage Capacity

Safety Measures

Safety Equipment in Place

Emergency Response Plan Description

Applicant Declaration

Applicant Name

Title/Position

Date