

## **RAILROAD COMMISSION OF TEXAS**

Oversight and Safety Division Alternative Fuels Safety Department

## CNG FORM 1018B

## STATEMENT OF LOST OR DESTROYED CNG FORM 1004 DECAL

Please Type or Print

I,,,,,,				
			(Title)	
do make this statement ve	rifying tha	t(Names under which Li	,	
		(Names under which Li	censee conducts CNG operations)	
, was issu	ed a Form	1004 identified as Decal No.	(container manufacturer & serial number)	
(license number)			(container manufacturer & serial number)	
for license year		, and that such decal	has been	
(Check one)		lost or stolen;		
(Gricon Gric)		<u> </u>		
		(If unknown, stat	e cause as unknown.)	
Company Phone No		Com	pany Fax No	
company i none ivo.			Sally Fax No.	
THE STATE OF:				
COUNTY OF:				
			lectronic signature, which shall be considered as a	
original signature for all pu	ırposes ar	nd shall have the same force and efforce	ect as an original signature.	
			(0: 1 )	
			(Signature)	
			(Signature)	

Railroad Commission of Texas Alternative Fuels Safety P.O. Box 12967 Austin, Texas 78711-2967 800-64-CLEAR

Fax (512) 463-7292 Rev. January 2021