

RAILROAD COMMISSION OF TEXAS

Oversight and Safety Division Alternative Fuels Safety Department

APPLICATION AND NOTICE OF EXCEPTION TO THE LP-GAS SAFETY RULES

Please Type or Print

INSTRUCTIONS: Any person may apply for an exception to the *LP-Gas Safety Rules*. All application filings must meet the submission requirements of Section 9.27 of the *LP-Gas Safety Rules*. Strict compliance with this section is necessary to ensure that fairness and uniformity in the administrative process is extended to all applicants. All applicants are routinely advised that a request for exception in no way guarantees that an exception will be granted. A non-refundable fee of \$50 must accompany each original application. If resubmission is required a non-refundable fee of \$30 must accompany each resubmission. DO NOT SEND CASH. Make Check or Money Order Payable To: The Railroad Commission of Texas. To pay by credit card please visit our website www.rrc.texas.gov.

PLEASE COMPLETE ALL BLANKS ON THIS FORM AND RETURN TO ALTERNATIVE FUELS SAFETY (AFS). FILE ONE LEGIBLE APPLICATION FORM PER SITE, LISTING ALL APPLICABLE EXCEPTIONS TO SAFETY RULE REFERENCES.

APPLICANT INFORMATION:

Applicant's name:	(Individual) representing (Company name, if applicable)					
	(Individual)	i	(Company name, if applicable)			
Lic. No.	Mailing Address:					
			(City, State)	(Zip Code)		
Tel. No.:(A/C)	Fax No(A/C)	I request a	n exception to Sectio	n(s) (give full safety		
rule reference)			of the LP	-Gas Safety Rules.		
GEOGRAPHICAL L	OCATION:					
If stationary LP-gas i	installation, give physical street addres	s or geographical locati	on:			
gere i						
				_		
	(Give directions fror	m nearest highway or town)				
Nearest town or city		<u>,</u> county of				
If stationary installati	on, is it located within municipal limits?	? □ Yes □ No				
STATEMENT OF D	ESIRED RELIEF:					
	quest for exception and how it specif also quote the exact reference and des			ty Rules or adopted		

STATEMENT OF SUPPORTING FACTS:

State the facts supporting your desired relief. Explain the social and economic impact if the exception is not granted. Estimate the total sum of all monetary factors or alternative solutions necessary to bring the installation or equipment into full compliance with the safety rules, plus any additional costs to the consumer, if applicable.

Social impact, if not granted (effect on the health, safety and welfare of individuals in the community or other stakeholders):

Economic impact, if not granted (effect on commerce, employment, income and other monetary factors):

SAFETY ASPECTS OF EXCEPTION:

Explain the safety aspects involved and how this exception may be justified without affecting the health, safety and welfare of the general public. If the exception involves an existing LP-gas installation or existing LP-gas mobile equipment, list existing safety features. What additional safety modification(s) could be made to offset the requested exception to the Commission's *LP-Gas Safety Rules* and adopted standards?

DESCRIPTION OF ACREAGE OR LEASED AREA:

If a stationary LP-gas installation, use the space below to describe the site sufficiently for determination of property or lease lines, land ownership, and by what legal authority the applicant, if not the owner, is permitted occupancy.

ATTACH SUPPORTING DOCUMENTS: A legal property description with a site plan indicating the dimensions of the boundaries described by the legal description or a plat showing the dimensions of the property description. The site plan must show all adjoining property lines, streets, and highway or railroad right-of-ways and must coincide with the legal property description or plat. The site plan may include other information such as buildings, storage containers, and other exposures relevant to the exception which is not indicated on the plat. If the area described is under lease, a copy of the lease agreement, and exhibit(s) showing the area under lease may be filed in lieu of the legal property description or plat.

Legal description and acreage:				

I have attached: Check applicable box(es)

- 1. \Box Legal property description with site plan
- 2. \Box Survey plat with site plan
- 3. Lease agreement with site plan

AFFECTED PARTIES WHO MUST BE SENT A COPY OF THIS REQUEST:

A copy of LPG Form 25 must be sent by certified mail, return receipt requested, or otherwise delivered to all affected parties as specified below on the same date on which the form is filed with or sent to AFS. The information shall include a notice that any objection shall be filed with AFS within 18 calendar days of postmark or other delivery of the form.

For stationary Installations:

- 1. D Persons or businesses owning or occupying property adjacent to the site;
- 2. The city council or fire marshal, if the site is within municipal limits; and
- 3. The county Commission, if the site is not within any municipal limits

For motor or mobile fuel installations:

- 1.
 □ The Texas Department of Public Safety; and
- 2. All processed gas loading and unloading facilities utilized by the applicant

AFS may require an applicant to give notice to persons in addition to those listed above if doing so will not prejudice the rights of any entity.

PLEASE GIVE FULL NAME AND ADDRESS OF EACH AFFECTED PARTY. EACH AFFECTED PARTY MUST BE AFFORDED AN OPPORTUNITY TO OBJECT OR NOT TO OBJECT TO THE EXCEPTION REQUESTED. THE PARTY SHALL NOTIFY THE SECTION IN WRITING OF SPECIFIC OBJECTIONS. THE ORIGINAL OF THE RETURN RECEIPT CARDS MUST BE FILED WITH YOUR ORIGINAL APPLICATION AS EVIDENCE THAT AFFECTED NOTICE WAS RECEIVED BY THE AFFECTED PARTY. ATTACH A COPY OF A LAND ABSTRACT OR MARK THE SITE PLAN ABOVE TO SHOW ALL ADJOINING PROPERTY OWNERS. LIST ALL NAMES AND ADDRESSES OF REQUIRED PARTIES TO RECEIVE NOTICE ON PAGE 4 OF THIS APPLICATION. USE PAGES 5 AND 6, NOTICE OF EXCEPTION TO AFFECTED PARTIES, AS THE INSTRUMENT OF NOTICE.

Stationary Installations Only:

I have attached: Check applicable box(es)

- 1.
 Land abstract of surrounding properties AND original certified mail return receipt(s) for each notice sent.
- 2.
 Expanded site plan showing surrounding properties and original certified mail return receipt(s) for each notice sent.

NOTE: ANY ATTACHED MATERIAL TO BE CONSIDERED MUST BE FILED WITH AN AFFIDAVIT SIGNED BY A PERSON HAVING PERSONAL KNOWLEDGE THAT THE INFORMATION PROVIDED IS TRUE AND CORRECT.

Names and addresses of parties that were mailed copies of this request.

1.			
	Name of person or entity		
	Mailing address	City, State	Zip Code
2.			
	Name of person or entity		
	Mailing address	City, State	Zip Code
3.			
0	Name of person or entity		
	Mailing address	City, State	Zip Code
4			
	Name of person or entity		
	Mailing address	City, State	Zip Code
5.			
0	Name of person or entity		
	Mailing address	City, State	Zip Code
ADD	DITIONAL COMMENTS:		

The applicant must make a credible case the exception in particular is necessary and an exception, if granted, would not impair or tend to impair the health, safety and welfare of general public. Photographs and other documentation may be submitted or requested by the division if necessary to clarify the applicant's intentions toward this purpose.

I certify all the person(s) named above have been sent a copy of LPG Form 25, with their contact information listed on page 5, by certified mail, return receipt requested. I understand that should the exception be granted, I may be required to file an LPG Form 500, Application to Install LPG Facility (Aggregate Water Capacity of 10,000 Gallons or More); LPG Form 500A, Notice of Proposed LP-Gas Installation; or LPG Form 501, Completion Report for LP-Gas Installations of Less Than 10,000 Gallons Aggregate Water Capacity. Any non-compliance with the safety rules could result in my company being subjected to administrative enforcement proceedings and/or administrative penalties under Chapter 113, Texas Natural Resources Code.

I declare under penalties in Section 91.143, Texas Natural Resources Code, I am authorized to make this application; it was prepared by me or under my supervision and direction, and the date and facts stated herein are true, correct and complete to the best of my knowledge. I also understand AFS must be notified of any changes to this application as soon as possible which may necessitate re-notification of adjoining property owners as required by Section 9.27 of the *LP-Gas Safety Rules*.

Additionally, applicant agrees that this application may be executed by electronic signature, which shall be considered as an original signature for all purposes and shall have the same force and effect as an original signature.

(Printed name of Applicant or Applicant's Representative)

(Authorized signature of Applicant or Applicant's Representative)

NOTICE OF EXCEPTION TO AFFECTED PARTIES

(Name of person or entity to receive notice.) (Address)		.)				
(City)	(State)	(Zip Code)	107105			
You have been notified Gas Safety Rules of the		rnmental enti				
	(Full na	ame of applicant	or person requesting e	xception)		
of						
A)	Address)		(City	r)	(State)	(Zip code)
has requested exception	n(s) to Section(s)					
		(Safety R	Rule Reference(s))			
of the LP-Gas Safety R	ules. The exception if	granted, is lo	ocated at:			
	(Street	address or other	accurate description of	f property)		
	(FF		
	(City)		(S	itate)	(Zi	p Code)
THE FOLLOWING SPA	CE IS TO BE USED	BY THE PAR	RTY WHICH RECE	IVED NOTICE		
l(1.DO				ected party have be		otice and have
received a copy of LPG			•	2		
I Object/Do Not Obje AFS in writing within particular exception req the section. A hearing Page 6 of this form or a the notice herein. Additionally, affected pa	18 days of the dat uested must be sen will be held when separate sheet of p	e the application of the to AFS. You the Railroad aper to list an	ation was mailed. I may request a co Commission of T Ind explain any reas	Any questions a copy of the comple exas receives prop sons for objection.	bout this pro te application er objections have read a	cedure or the on file with You may use nd understand
an original signature for						
	(Printed name of affect	ted party)			(Date)	
	(Signature of affected	d party)		(A/C)	(Telephon	e No.)
	(Address)					
(City)		State	Zip Code			
			CODM 25			

LPG FORM 25 Page 5 of 6

By filing this application via facsimile transmission, applicant voluntarily stipulates and agrees that the filed facsimile copy shall be treated as an original document for all purposes in any court or administrative proceeding.

Return to: Railroad Commission of Texas Alternative Fuels Safety PO Box 12967 Austin, Texas 78711-2967 FAX (512) 682-9066

Rev. October 2020