

HATFIELD TOWNSHIP

AEROSOL PRODUCTS PERMIT APPLICATION PROCEDURES

An aerosol products permit is required to manufacture, store or handle an aggregate quantity of Level 2 or Level 3 aerosol products in excess of 500 pound.

PART I – Location of Property – Complete address including city, state and zip code must be provided on all applications.

PARTS II thru IX – Complete every section.

PART X – Sign and date application. If property resident is not the owner of the property, a notarized statement indicating the owner's approval of the proposed construction must be submitted with the application. Provide phone numbers for property owner/resident and contractor. Contractors making application must be registered with Hatfield Township annually.

ADDITIONAL INFORMATION

FEES – Permit fees must be submitted with the permit application. If paying by check, please make check payable to "Hatfield Township".

REVIEW – The application plans will be reviewed by the Fire Marshal's Office for compliance with the codes of Hatfield Township and the Pennsylvania Uniform Construction Code.

PERMIT GRANTED – **If approved, the permit will be processed and issued within thirty (30) business days. Work may not start until a permit has been approved and granted.** The permit cards are to be displayed so as to be visible from the street.

NOTES: All Subdivision and Land Development approvals must be complete before submitting hazardous materials permit applications.

Requirements for the Submission of Aerosol Products Plans for Review

Permit application package shall include:

1. A fully completed Aerosol Products Permit Application.
2. A submittal package and set of plans which shall include:
 - 2 copies of the hazardous materials inventory and maximum daily quantity on site for all Level 2 and Level 3 aerosol products;
 - 1 copy of the manufacture/supplier material safety data sheet (MSDS) for each aerosol product in the hazardous materials inventory;
 - 1 complete set of construction drawings (if applicable);
 - 3 sets of floor plans for the facility which indicate the use of all areas and rooms, the location of all pertinent aerosol products, control areas and storage/container types and arrangements;
 - 1 site plan indicating the location the facility, all paved areas and fire lanes.

Failure to provide all of the above information will result in a delay in the approval of the permit application!

HATFIELD TOWNSHIP

Aerosol Products Permit Application

I - LOCATION OF PROPERTY

Address: _____ Suite #: _____ City: _____

State: _____ ZIP: _____

Business/Tenant Name: _____

II - OWNERSHIP

☐ Private ☐ Public ☐ Tenant Tenant Name: _____

III - IDENTIFICATION – To be completed by all applicants

APPLICANT Name: _____ Phone: _____

Company: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email Address: _____

OWNER Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip Code: _____

CONTRACTOR Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip Code: _____

DESIGN Name: _____ Phone: _____

PROFESSIONAL

Address: _____

City: _____ State: _____ Zip Code: _____

Design Professional: [] Architect [] Professional Engineer

Certification No. _____

IV - COMMODITY INFORMATION

☐ Level 2 aerosol products Maximum daily quantity on site: _____

☐ Level 3 aerosol products Maximum daily quantity on site: _____

☐ Manufacture ☐ Use ☐ Handling ☐ Retail display/sales ☐ Other: _____

Location of product storage: ☐ Basement ☐ 1st floor ☐ 2nd floor ☐ 3rd floor ☐ 4th floor ☐ Outside

Size of storage area: _____ square feet Is aerosol storage segregated from other materials?: _____

☐ Rack storage ☐ Palletized storage ☐ Pile storage ☐ Other: _____

Commodity/Storage Description: _____

V – OCCUPANCY TYPE

☐ Business/Office ☐ Mercantile/Store ☐ Industrial/Factory ☐ Repair Garage/Fuel Dispensing ☐ Storage

☐ High Hazard H-1 H-2 H-3 H-4 H-5 (circle one)

Will the public have access to the hazardous materials operational/storage area(s)? _____

Description _____

VI – CONSTRUCTION TYPE

☐ Non-Combustible ☐ Non-Combustible/Combustible ☐ Combustible

☐ Masonry (bearing walls) ☐ Steel Frame ☐ Reinforced Concrete ☐ Wood Frame

☐ Truss Construction ☐ Steel ☐ Wood ☐ Floor/Ceiling ☐ Roof

Description _____

VII – FIRE PROTECTION DESIGN INFORMATION

Sprinkler System Design Density: _____ G.P.M. per square foot Area of Design: _____ square feet

Temperature rating of ceiling sprinkler heads: _____ ESFR sprinkler system?: ☐ yes ☐ no

Fire alarm/detection system: ☐ Manual pull stations ☐ Smoke detection ☐ Heat detection ☐ Other: _____

VIII – BUILDING DIMENSIONS

Number of Stories: _____ Square Feet-Building: _____ Square Feet-Haz-Mat Area(s): _____

Square Feet-Basement: _____ 1st Floor: _____ 2nd Floor: _____ 3rd Floor: _____

IX – SCHEDULE OF FEES

- | | |
|----------------------------------|----------|
| • 1 – 2,000 Square Feet | \$200.00 |
| • 2,001 – 5,000 Square Feet | \$250.00 |
| • 5,001 – 10,000 Square Feet | \$300.00 |
| • 10,001 – 100,000 Square Feet | \$400.00 |
| • 100,001 Square Feet or Greater | \$500.00 |

Total square footage of the building/facility: _____ Permit Fee: _____

X - SIGNATURE

Deposit of check representing the fee for this application does not constitute approval of or granting of same by Hatfield Township. I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his agent and we agree to conform to all applicable laws of Hatfield Township.

SIGNATURE OF APPLICANT

DATE
