



*Wylie Fire Prevention Community Risk
Reduction Division*
Mailing Address: 300 Country Club
Physical Address: 300 Country Club Rd. - Bldg.
100 Wylie, TX 75098
Prevention@wylietexas.gov
(972) 442-8110

FLAMMABLE & COMBUSTIBLE LIQUID TANK STORAGE INSTALLATION & REMOVAL

Document Submittals

- The Wylie Fire Department requires **two copies** and **one electronic copy** of system drawings and should include seal, signature and date of license.
- Notarized letter certifying plans meet the International Fire Code (IFC) 2015 and current NFPA 30 standards.
- A copy of licensed certificate
- Plans must be reviewed and stamped by the Wylie Fire Prevention Officer.

*****Is the use of flammable or combustible liquid will be used for a manufacturing process?***

Yes or No

If the answer was yes to the above question, please request annual permit paperwork for Flammable or Combustible Storage Tanks.

Plan Approval

- A representative of the Wylie Fire Prevention Community Risk Reduction must inspect and implement a plan review. If the plan review is completed successfully, applicant will receive a set of signed plans and letter stating the Wylie Fire Department has approved and verified components in the plans to the best of their knowledge. Please allow a **ten business day turnaround** for this process. A permit will be issued after plans have been reviewed and approved.

Final Acceptance Test

- A representative of the Wylie Fire Prevention Bureau must perform visual inspection and witness final testing performed by the installer. **Please call (972) 442-8110 24 to 48 hours in advance to schedule an appointment for visual and hydrostatic testing.**

Fee: \$250.00 Checks or Exact Change Required

PERMIT HOLDER IS RESPONSIBLE FOR REQUESTING AND COMPLETING ALL REQUIRED INSPECTIONS; FEES INCLUDE ONE (1) REINSPECTION. PERMIT HOLDERS WILL BE CHARGED \$75 FOR EACH ADDITIONAL INSPECTION REQUIRED.



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**PERMIT APPLICATION—INSTALLATION & REMOVAL
FLAMMABLE & COMBUSTIBLE LIQUIDS STORAGE**

- Fire Department Review
- Two copies of system drawings with appropriate seals, signatures and license information.
- Notarized letter
- Copy of responsible party's driver license

Installer/Company Name: _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Representative's Name: _____

Telephone No.: _____

Job Name and Address: _____

Contractor Name (if different than above): _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Representative's Name: _____

Telephone No.: _____

Date of Contractor Registration: _____

Contractor Renewal Date: _____

Receipt No: _____

Permit Fee: \$250.00 **Date:** _____

Check #: _____ **Cash:** _____ **Receipt No.:** _____

Reinspection Fee: \$75.00 **Date:** _____ **Receipt No:** _____