



AMHERST FIRE DEPARTMENT

P.O. BOX 1199, 177 AMHERST STREET
AMHERST, NH 03031
TEL.—(603) 673-1545, FAX.—(603) 672-3927

UNDERGROUND TANK REMOVAL PERMIT

Property owner: _____ Telephone number: _____

Location: _____ Date of removal: _____ Capacity of tank: _____

Company removing tank: _____

Address: _____ Telephone number: _____

Company cleaning tank: _____

Address: _____ Telephone number: _____

Scrap yard destination: _____

Address: _____ Telephone number: _____

IN ORDER TO ARRANGE FOR AN A.F.D. INSPECTOR TO BE PRESENT, PLEASE ALLOW AT LEAST 24 HOURS NOTICE FOR TANK REMOVALS.

An A.F.D. Inspector will confirm the tank has been cleaned. The Inspector must witness tank removal and check ground soil condition.

Certification of Removal:

Amherst Fire Department Inspector's Signature

Date

Notes: _____

White—AFD

Yellow—Applicant