



Office of the State Fire Marshal
1700 MacCorkle Avenue SE – 4th Floor North
Plans and Review Division
Charleston, WV 25314
304-558-2191

Application for Review of Above Ground Storage Tanks

REQUIREMENTS FOR ABOVE GROUND STORAGE TANKS REVIEW

- A completed Plans Review Application shall be completed by the plans submitter and shall be filled out in its entirety.
- Above Ground Storage Tank Plans shall be submitted via **hard copy AND USB flash drive only.**
- A complete set of plans shall be drawn to scale and include:
 - Site Plans Indicating:
 - Tank location
 - Distance from all buildings, property lines, and public ways.
 - Location, size, and distances of bollards from tank.
 - Location of emergency shut off.
 - Tank size and manufacturers cut sheets on tank.
 - If area is not fenced, indicate location of fence that is at least 10 feet surrounding the tank.
 - Contents of what is being stored in the tank.

All plans being submitted to our agency for review **MUST** be accompanied by the appropriate request application. All applications can be found on our website by type of review. If this form is **NOT** received within thirty (30) days of receipt of plans, the plans submission may be discarded. If the request application is not completed, it will be returned for resubmission.

Review Fee includes **ALL** Construction Inspections, the Final Inspection, and the Occupancy Permit and will be billed after review and processing.

If you have any further questions, please contact our office at 304-558-2191.

Please submit your completed Plans Review Application and Plans to:

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Application for Review of Above Ground Storage Tank Plans

New Application Resubmittal Prior Walk-In Review

PROJECT INFORMATION

Project Name					
Street Address					
City		State		Zip	
County					

SCOPE OF WORK

New Construction Existing Modifications

Occupancy Type (Mercantile or Fleet Fueling)	Estimated Construction Cost: \$
Description of Project:	
Estimated Starting Date:	

TANK INFORMATION

Tank Capacity:	Tank UL Design:
Manufacturer Data:	Tank Single or Aggregate:
If Aggregate, how many tanks?	Contents Stored in Tank:



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PROJECT/PROPERTY OWNER CONTACT INFORMATION

Project/Property Owner Name					
Street Address					
City		State		Zip	
Email Address					
Phone Number					

PLANS SUBMITTER CONTACT INFORMATION

Submitter Name					
Submitter Company					
Street Address					
City		State		Zip	
Email Address					
Phone Number					

BILL INVOICE TO

Name					
Company					
Street Address					
City		State		Zip	
Email Address					
Phone Number					

Signature: _____ Date: _____