



**City of Casa Grande, Fire Department , 510 E. Florence Blvd, Casa Grande, AZ 85122**  
**(520) 421-8630 Development Center Office (520) 421-8777 Fire Dept. Office (520) 836-1129 Fire Dept. Fax**  
**<http://www.casagrandeaz.gov/web/guest/permits>**

# **HAZARDOUS MATERIALS OPERATING PERMIT APPLICATION FORM**

Email Applications to: [dcpermits2@gmail.com](mailto:dcpermits2@gmail.com)  
Parts I – III must be completed by Applicant

## Part I

## Applicant/Building Information

**Applicant Name:** \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone No: \_\_\_\_\_ Email: \_\_\_\_\_

Address of Premises for which Operating Permit is requested: \_\_\_\_\_

Same as above       Other (please specify) \_\_\_\_\_

**Current Occupancy Class:** \_\_\_\_\_

## -Part II

## Type of Operating Permit

Manufacturing, storing or handling hazardous materials, flammable and combustible liquids, compressed gases, liquefied petroleum. Identify the materials and quantities and describe the manner in which the materials will be manufactured, stored or handled (attach additional sheets if necessary):

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- Spraying or Dipping - an operational permit is required to conduct a spraying or dipping operation utilizing flammable or combustible liquids or the application of combustible powders.
- High Piled Storage - an operational permit is required for to use a building or portion thereof as a high piled storage area exceeding 500 square feet.
- Fireworks - an operational permit is required to sell or store fireworks in the City of Casa Grande.
- Fireworks Display - an operational permit is required to display fireworks in the City of Casa Grande.



## Part III

### Premises/Building Information

1. Has State Tier II application been made  yes  no

2. Date of last Inspection of Premises? \_\_\_\_\_

3. Has a Certificate of Occupancy been issued for the premises?

YES  
 NO

Type:  Permanent  Temporary

Date of Issuance: \_\_\_\_\_

4. Date(s) of issuance of previous Certificate(s) of Occupancy? (If any): \_\_\_\_\_

5. Has a Certificate of Compliance been issued for these Premises?

YES  
 NO

Type:  Permanent  Temporary

Date of Issuance: \_\_\_\_\_

6. Are there currently any open Building Permits associated with the premises?  YES  NO  
 If yes, please describe (attach additional sheets if necessary):  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

#### SIGNATURE OF APPLICANT

I hereby certify that the foregoing information (and all information in attached sheets, if any) is true and complete.

\_\_\_\_\_  
 Signature of Applicant or Authorized Representative

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Name and Title (if applicable) of person signing Application - Please Print