



LICENSE APPLICATION HAZARDOUS MATERIALS

Follow Instructions listed on Instruction Sheet
For further information call (215) 686-8686

DEPARTMENT OF LICENSES AND INSPECTIONS
CUSTOMER CARE UNIT, PUBLIC SERVICE CONCOURSE
1401 JOHN F. KENNEDY BOULEVARD
PHILADELPHIA, PA 19102-1687

USE A SINGLE CHECK FOR ALL FEES, PAYABLE TO
"CITY OF PHILADELPHIA"

1. OWNER	2. BUSINESS NAME
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1A. APPLICANT'S NAME	1B. EMAIL ADDRESS
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3. LOCATION OF LICENSED ACTIVITY (Include ZIP Code)	4. BUSINESS TELEPHONE NUMBER
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5. BILLING ADDRESS City State ZIP Code	6. DATE ACTIVITY STARTED
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7. PHILADELPHIA BUSINESS INCOME AND RECEIPTS TAX NUMBER	8. PHILADELPHIA COMMERCIAL ACTIVITY LICENSE NUMBER
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10. DESCRIPTION OF ACTIVITY OR BUSINESS

11. LICENSE	LIC. FEE	LIC. CODE	EXPIRATION DATE	LICENSE NUMBER
HAZARDOUS MATERIAL HANDLING LICENSE MATERIAL TYPE, CHECK ALL THAT APPLY	\$ 207.00	3335	DECEMBER 31	

- AEROSOL PRODUCTS
- CELLULOSE NITRATE (PYROXYLIN) PLASTICS
- COMPRESSED GASES
- CORROSIVES
- CRYOGENIC LIQUIDS
- EXPLOSIVE MATERIALS
- FLAMMABLE AND COMBUSTIBLE LIQUIDS
- FLAMMABLE AND COMBUSTIBLE LIQUID STATIONARY TANK STORAGE # _____ TANKS
- FLAMMABLE SOLIDS
- TOXIC SOLIDS AND LIQUIDS
- IRRITANTS, SENSITIZERS AND HEALTH HAZARDS
- PYROPHORIC MATERIALS
- RADIOACTIVE MATERIALS
- UNSTABLE (REACTIVE) MATERIALS
- WATER-REACTIVE MATERIALS

PLEASE BE SURE TO READ AND COMPLETE THE OTHER SIDE OF THE APPLICATION

12. OWNER, CORPORATION AND PARTNERSHIP (list three principals if corporation). Attach additional sheet with information if necessary.

NAME	TITLE	HOME ADDRESS (INCLUDE CITY, STATE, & ZIP CODE. <u>P.O. BOX NOT ACCEPTABLE</u>)

13. COMMENTS / ADDITIONAL INFORMATION

14. APPLICANT CERTIFICATION

I certify that the statements contained herein are true and correct to the best of my knowledge and belief. I understand that if I knowingly make any false statement herein I am subject to the possible revocation of any license issued as a result of my false application and such other penalties as may be prescribed by law.

Applicant's Signature _____ *Date* _____