

**NEW HAMPSHIRE DEPARTMENT OF ENERGY
 JURISDICTIONAL LP GAS FACILITIES REPORT
 (In compliance with En 511.03)**

OPERATOR NAME: _____
 ADDRESS: _____
 CITY/TOWN: _____ ZIP CODE: _____
 CONTACT PERSON: TELEPHONE: _____
 E-MAIL: _____
 FAX: _____

I do not operate any jurisdictional LP gas Facilities.
 I declare that, to the best of my knowledge and belief, this information is true, correct, and complete.

Puc 512.03 E-27-A Jurisdictional LP Gas Facilities Report.

(a) Each LPG operator shall submit the commission's Form E-27-A "Jurisdictional LP Gas Facilities Report" to the enforcement division of the department within 30 days after notice of all newly installed, acquired, transferred or discontinued jurisdictional systems.

(b) The completed form shall include the following:

- (1) Name of the LPG operator and contact person, with telephone number; _____
- (2) Date of installation, acquisition or transfer of facilities; _____
- (3) Size of tank; _____
- (4) Location of the facilities, including street name and number, city or town, and locus map; _____
- (5) Number of meters and customers; and _____
- (6) Supervisor's name and signature, with date of signature. _____

(c) If a LPG operator is providing LPG to a facility that such operator believes to match the criteria of a jurisdictional system, such operator shall notify the owner of the facility and the safety division of the existence of said facility.

SIGNATURE: _____
 PRINTED NAME: DATE: _____

Source: #8259, eff 1-19-05; ss by #10334, eff 5-10-13

DATE OF INSTALLATION, ACQUISITION OR TRANSFER OF FACILITY	FACILITY NAME	FACILITY ADDRESS #	FACILITY STREET NAME	CITY/TOWN	ZIP CODE	TANK TYPE AG = above ground UG = under ground	LATITUDE	LONGITUDE	# OF CUSTOMERS/ METERS	TANK SIZE

