



# RAILROAD COMMISSION OF TEXAS

Oversight and Safety Division

Alternative Fuels Safety Department

**LNG FORM  
2500**

**APPLICATION TO INSTALL LNG FACILITY  
(AGGREGATE WATER CAPACITY OF 15,540 GALLONS OR MORE)**

*Please Type or Print*

INSTRUCTIONS TO LICENSEE: Section 14.2040 of the *Regulations for Liquefied Natural Gas* requires this form to be filed 30 days prior to construction of a stationary LNG installation having an aggregate water capacity of 15,540 water gallons or more. A separate form must be used for each type of facility proposed to be installed.

A non-refundable fee of \$50 must accompany each original application. If the form is returned for corrections, or revised plans and specifications are submitted, a non-refundable fee of \$30 must accompany each resubmission. DO NOT SEND CASH. Make Check or Money Order Payable To: **The Railroad Commission of Texas**. To pay by credit card please visit our website [www.rrc.texas.gov](http://www.rrc.texas.gov).

Name of licensee making the installation: \_\_\_\_\_  
(Company Name)

LPG License No. \_\_\_\_\_ (Mailing Address)

\_\_\_\_\_  
(City) (State) (Zip Code)

Contact: \_\_\_\_\_  
(A/C) (Telephone No.) (A/C) (FAX No.)

Proposed installation will be installed at \_\_\_\_\_  
(Facility Name)

Geographical Location \_\_\_\_\_  
(Street Address or Clear Directions to Facility)

\_\_\_\_\_  
(City) (County) (State) (A/C) (Telephone No.) (Contact Person) (Title)

GPS (Lat. & Long.) N: \_\_\_\_\_ W: \_\_\_\_\_

Mailing Address \_\_\_\_\_  
(Address) (City) (State) (Zip Code)

Check appropriate box(es):

☐ Commercial (describe):

☐ Vehicle Refueling (describe):

☐ Other LPG (describe):

☐ Temporary LNG Installation (describe):

Aggregate water capacity of existing LNG installation \_\_\_\_\_ Gallons, if applicable

Aggregate water capacity of container(s) to be installed \_\_\_\_\_ Gallons

Type of installation: ☐ New Installation ☐ Container Addition ☐ Container Replacement  
(Additional information if necessary)

LNG Container Information:

Container(s) to be Installed Are: ☐ New ☐ Used ☐ Both

If Container(s) were previously used: \_\_\_\_\_  
(Name and Geographical Location of Previous Installation) (Type of Installation)

\_\_\_\_\_  
(Facility Operator)

Container Condition Verified: ☐ Form 2008 ☐ Form 2023 ☐ Mfg. Date Report

LNG Container(s): (W.C.= Water Capacity; W.P.= Working Pressure)

Mfg. Name \_\_\_\_\_ Serial No. \_\_\_\_\_ W.C. \_\_\_\_\_ Yr. Built \_\_\_\_\_ W.P. \_\_\_\_\_

Mfg. Name \_\_\_\_\_ Serial No. \_\_\_\_\_ W.C. \_\_\_\_\_ Yr. Built \_\_\_\_\_ W.P. \_\_\_\_\_

Mfg. Name \_\_\_\_\_ Serial No. \_\_\_\_\_ W.C. \_\_\_\_\_ Yr. Built \_\_\_\_\_ W.P. \_\_\_\_\_

(Attach additional sheets if necessary)

Distance from proposed container(s) to:

Nearest Building/Structure \_\_\_\_\_ Electrical Transmission Line \_\_\_\_\_

Property Line- North \_\_\_\_\_, South \_\_\_\_\_, East \_\_\_\_\_, West \_\_\_\_\_

Nearest Source of Ignition \_\_\_\_\_ Material Handling Equipment (Pumps/Compressors) \_\_\_\_\_

Nearest Hwy or Public Street \_\_\_\_\_ Point of Transfer \_\_\_\_\_

Other type fuel container such as gasoline/diesel \_\_\_\_\_

Other type fuel dispensers such as gasoline/diesel \_\_\_\_\_

**SUPPORTING DOCUMENTATION REQUIRED TO BE INCLUDED WITH APPLICATION:**

- LNG Form 2500A
- Certified mail receipts from post office
- List of real property owners notified
- A plat drawing from the appropriate appraisal district identifying all real property owners within a 500-foot radius
- A site plan of sufficient scale that includes all of the items listed in section 14.2040(c)(4)
- Documentation from the local fire and emergency response organizations stating that the proposed installation complies with the fire protection requirements of section 14.2131

Certification: I declare, under penalties prescribed in Sec. 91.143, Texas Natural Resources Code, that I am authorized to make the representations set out on this form to comply with the *Regulations for Liquefied Natural Gas* of the Railroad Commission of Texas, and the Texas Natural Resources Code; that this form was prepared by me or under my supervision and direction; and that the statements made are true, correct, and complete, to the best of my knowledge.

Additionally, applicant agrees that this application may be executed by electronic signature, which shall be considered as an original signature for all purposes and shall have the same force and effect as an original signature.

By filing this application via facsimile transmission, applicant voluntarily stipulates and agrees that the filed facsimile copy shall be treated as an original document for all purposes in any court or administrative proceeding.

\_\_\_\_\_  
(Printed Name of Licensee Company Representative)

\_\_\_\_\_  
(Signature of Company Representative)

\_\_\_\_\_  
(Date)

Return to:  
Railroad Commission of Texas  
Alternative Fuels Safety  
P.O. Box 12967  
Austin, Texas 78711-2967

FAX (512) 463-7292

Rev. January 2021