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Planning Department

Visit us @ www.planning.gov.ky

P.O. Box 113
Grand Cayman
KY1-9000
Cayman Islands

GENERATORS & STORAGE TANKS

L:\Application forms\fuel tanks.pub

APPLICANT INFORMATION

Name _____
Postal Address _____
KY1- _____
Phone (not a cell #) _____
E-mail _____

AGENT INFORMATION

Name _____
Postal Address _____
KY1- _____
Phone (not a cell #) _____
Fax Number _____
E-mail _____

LAND INFORMATION

Block Parcel

PROJECT INFORMATION

Describe existing development (if any) on the site

Describe surrounding land uses

Tank Volume: _____ gallons
Tank Type: Gas Diesel Propane

Reminder: Storage Tank regulations and checklists can be reviewed within the Petroleum Inspectorate section of the Planning Department website (www.planning.gov.ky).

COST OF DEVELOPMENT

Materials CIS _____
Labour CIS _____
Total CIS _____

I hereby certify that the information provided is accurate and true.

Signature _____ Date _____
Applicant/Agent (dd/mm/yy)

Accepted By _____
Date _____ Time _____

QUALIFICATIONS FOR REVIEW *

- Proof of notice to all adjacent properties (if not for a House or Duplex)
- Three (3) copies of site plan illustrating the proposed development(s) on the site, including setbacks
- Two (s) copies of elevations. For existing & similar new structures, photographs may be acceptable
- Application Fee
- Registry Map & Land Register (less than 60 days old) (1 Copy Each)

Note that supplying these requirements does not guarantee approval

For Official Use Only

PLN Fee \$ _____
Fee Rate _____
Date Paid _____

File No _____
Project No(s) _____
Building Permit No(s) _____

Date Stamp

Planning Approval Stamp

Planning Fee Paid Stamp