



**REPORT OF APPARENT LP-GAS REGULATIONS VIOLATION**

Name of Occupant/Facility: \_\_\_\_\_

Physical Address of Violation: \_\_\_\_\_

\_\_\_\_\_  
(City) (County) (Driving Directions)

\_\_\_\_\_  
*In filling out this form show an exact, easy to locate, physical address (Route 4, Box 109 is known only to the mailman.).*

Describe Violations (s) including Regulation Number(s): \_\_\_\_\_

\_\_\_\_\_  
*List the specific regulation (s) violation(s) by number, i.e., 3-2.2.2. - AThe 1,000 gallon tank is five feet from the restaurant building. @*

Name of Propane Marketer servicing the installation: \_\_\_\_\_

\_\_\_\_\_  
(Address) (City)

This was prepared by me or under my supervision and direction, and thus the date and facts stated above are true and correct to the best of my knowledge.

\_\_\_\_\_  
Signature Company

\_\_\_\_\_  
Name - print or type Date

Send to: Safety & Compliance Committee  
Michigan Propane Gas Association  
629 W Hillsdale  
Lansing, MI 48933  
Phone: (517) 487-2021  
Fax: (517) 485-9408