



# RAILROAD COMMISSION OF TEXAS

# LPG FORM 19

Oversight and Safety Division  
Alternative Fuels Safety Department

## TRANSFER OF LP-GAS BULK STORAGE PLANT OR CYLINDER FILLING/SERVICE STATION

*Please Type or Print*

COMPANY NAME \_\_\_\_\_ LICENSE NUMBER \_\_\_\_\_

INSTRUCTIONS: File this form with LP-Gas Operations only for the transfer of operations of installations from one licensee to another. NOTE: List only those bulk storage and cylinder filling/service station containers operated by your company as well as their geographical location. Indicate the use of each container by answering YES or NO in the columns labeled BULK STORAGE and CYLINDER FILLING/SERVICE STATION. If the space provided is insufficient, please use additional forms for container and site information.

For installation located in \_\_\_\_\_ at \_\_\_\_\_  
County Geographical location City

CONTAINER MANUFACTURER	SERIAL NUMBER	W.G. CAPACITY	DESIGN PRESSURE	BULK STORAGE	CYLINDER FILLING/SERVICE STATION

For installation located in \_\_\_\_\_ at \_\_\_\_\_  
County Geographical location City

CONTAINER MANUFACTURER	SERIAL NUMBER	W.G. CAPACITY	DESIGN PRESSURE	BULK STORAGE	CYLINDER FILLING/SERVICE STATION

I declare under penalties prescribed in Section 91.143, Texas Natural Resources Code, I am authorized to sign this report, and the information stated herein is 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.

Return to:  
Railroad Commission of Texas  
Alternative Fuels Safety  
P.O. Box 12967  
Austin, Texas 78711-2967  
800-64-CLEAR  
Fax (512) 463-7292

Rev. October 2020

\_\_\_\_\_  
Printed Name of Authorized Company Representative

\_\_\_\_\_  
Signature of Authorized Company Representative

( \_\_\_\_\_ ) \_\_\_\_\_  
Area Code Telephone Number Date