

MOBILE FUELERS INFORMATION / REQUIREMENTS & GUIDELINES

Companies conducting mobile fueling shall comply with Article 79 of the
Clark County Fire Code 2005 Edition

Business Name _____ **Date** _____

Address _____

Individuals conducting mobile fueling operations must adhere to the safety requirements contained within the Clark County Fire Code and the following:

1. Insure the dispensing line does not exceed 50 feet in length.
2. Insure the dispensing hose is properly placed on an approved reel or in a compartment provided for this purpose. Dispensing hose must be properly stored before the tank vehicle is moved.
3. Verify that signs prohibiting smoking or open flame within 25 feet of a tank vehicle or the point of refueling are prominently posted on the tank vehicle.
4. Confirm that the electrical devices and wiring in areas where fuel dispensing is conducted are in accordance with the Clark County Electrical Code.
5. Maintain vapor-recovery in accordance with Section 5202.13 of the Clark County Fire Code.
6. Insure tank vehicle dispensing equipment is operated only by designated personnel who are trained to handle and dispense motor fuels
7. Substantiate that provisions are made for controlling and mitigating unauthorized discharges/spills.
8. Maintain fuel dispensing operations a minimum of 50 feet from structures or combustible storage.
9. Verify that a fire extinguisher with a minimum rating of 40BC is provided on the vehicle with signage clearly indicating its location.
10. Notify the Clark County Fire Department immediately when a spill or unauthorized discharge of more than 5 gallons occurs.
11. Store all fueling equipment within the body of the mobile fueling vehicle.

Report:

After review of the above guidelines, fuel dispensing personnel shall sign and date below. Maintain a copy of the CCFD permit and this report on the mobile fueling vehicle at all times. Signature implies understanding and agreement to comply with CCFD guidelines and the 2005 Clark County Fire Code.

_____	_____
_____	_____
_____	_____
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