Department of Environmental Protection

2600 Blair Stone Road ♦ Tallahassee, Florida 32399-2400

DEP Form: 62-761.900(9)
Form Title: Storage Tank Equipment Registration Form
Effective Date: January 2017
Incorporated in Rule 62-761.850, F.A.C.

Storage Tank Equipment Registration Form

Fill out completely

General Information

Company Name: Red Lion Control Inc
Contact Name: Joe Weaver
Company Address: 20 Willow Springs Circle
City: York
Zip: Pa.
E-mail: joe.weaver@redlion.net
Contact Number: 717-767-6961 ext 6306
Product Name: Analog Process Input Panel Meter
Model Number(s): PAXP0010
Product Type: Panel Meter
Rule(s) citation within Chapter 62-761, or 62-762, F.A.C. that registration is being requested: _____

Write a brief description of equipment registration request including product limitations:

Registration to 62-762-501 for overfill protection

Information Checklist

		Yes	No	N/A
1.	Third-party Certification by a Nationally Recognized Testing Laboratory?	✔		
2.	Documentation of third-party evaluation that the equipment meets DEP Rules?	✔		
3.	Documents included about the qualifications of the Nationally Recognized Testing Laboratory?			✔
4.	Installation instructions included?	✔		
5.	Technical information and drawings included?	✔		
6.	Annual Operability Testing Requirements (Rules 62-761.700, 62-762.701, & 62-762.702 F.A.C.)?			
7.	Compatible with fuel blends containing >10% ethanol or >20% biodiesel?			✔
8.	Has the product been approved or registered in other countries or states? (If so provide list)			✔
9.	Any requirements for company-certified installers or trainers?		✔	
10.	Was this product(s) previously approved or registered by the Department?		✔	
	If yes, please specify the Equipment Number: **EQ-_____**			✔
11.	Any changes or modifications to the equipment since the last submittal to DEP?			✔

Document Information: Provide supporting documents indicated as "Yes" above including this form via email to Tanknotify@dep.state.fl.us, or documents can be sent to FDEP, Division of Waste Management, 2600 Blair Stone Road, MS 4560, Tallahassee, FL 32399.

Write a brief description of equipment installation and performance in the U.S.:

Equipment Registration Certification:

To the best of my knowledge and belief, all information submitted on this form is true, accurate and complete.

Joe Weaver Engineering Test Manager
Printed Name and Title

Joe Weaver
Digitally signed by Joe Weaver
Date: 2018.06.21 14:29:31 -04'00'
Signature

6/21/2018
Date

For Department Use Only:

Date Application Received: 6/21/2018/Renew By 6/22/2023
Application complete: Yes: ✔ No: ☐

EQ- 899
Date of complete or incomplete letter sent: 6/22/2018
Date of entry to the DEP Equipment Registration List: 6/22/2018