



# RAILROAD COMMISSION OF TEXAS

# LPG FORM 22

Oversight and Safety Division  
Alternative Fuels Safety Department

## REPORT OF LP-GAS SAFETY RULE VIOLATION

*Please Type or Print*

INSTRUCTIONS: This form may be filed with Alternative Fuels Safety in accordance with Section 9.38 of the *LP-Gas Safety Rules* for any stationary or mobile LP-Gas installation. **Incomplete forms will not be accepted.** The division will use this form at its own discretion with regard to action taken against the violator.

NAME OF OCCUPANT/LICENSEE/VIOLATOR: \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_  
(Street Address or P. O. Box)

\_\_\_\_\_  
(City) (State) (Zip Code)

PHYSICAL ADDRESS OF VIOLATORS \_\_\_\_\_  
(City) (County)

DATE/TIME OBSERVED \_\_\_\_\_

CHECK THE FOLLOWING WHICH APPLY:

Violator was:  Customer  LPG Installer  LPG Supplier

Violation(s) still exist:  Yes  No Supporting Documentation Attached:  Yes  No

DESCRIBE VIOLATION (S):  
(Use section references for the *LP-Gas Safety Rules* or adopted codes)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I declare under penalties prescribed in Section 91.143. Texas Natural Resources Code, this form was prepared by me or under my supervision and direction and that the data and facts stated herein are true and correct to the best of my knowledge. I did not service the subject LP-Gas installation because of the violation(s) observed.

Additionally, I agree that this form 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.

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Authorized Signature of Complainant)

\_\_\_\_\_  
(Telephone Number)

\_\_\_\_\_  
(Mailing Address)

\_\_\_\_\_  
(City) (State) (Zip Code)

Return to:  
Railroad Commission of Texas  
Alternative Fuels Safety  
P.O. Box 12967  
Austin Texas 78711-2967

Fax (512) 682-9066

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