

## Class X (10) Inactive Permit Renewal Application Renew online at: lpgas.ok.gov

Name of Applicant:		Last 4 digits of yo	our SSN:
Street Address: Street		City State	 Zip
Telephone: ()			<u>-</u>
READ BELOW AND INITIAL			
I understand that this permit will expire on August 31st each year. An additional 25% late fee will be assessed if renewed after this date.			
I understand that no permit will be renewed aff	er September 30	oth, without the approval of the LP Ga	s Administrator.
I certify that this information is true and correct regulations promulgated by the Liquified Petro et seq. shall be cause for suspension or revoc	leum Gas Board	or Oklahoma Statutes Title 52, Chap	
DEDUK NUMBER	Signed:		
PERMIT NUMBER:	Drint Names	(Ву а	pplicant or authorized official)
EXPIRATION DATE:	Fillit Name.		
DATE ISSUED://	Title:	Dat	e:/
PROCESSED BY:			
Permit will NOT be issued unless all above questions are answered.			
PAYMENT METHODS:			
RENEWAL FEE: \$105.00	EMAIL:	PO BOX 53218 OKLAHOMA CITY, OK 73152 LPGASINFO@LPGAS.OK.GOV	<b>FAX</b> : (405) 521-6037