



# Class IV (4) Permit Renewal Application

The Class IV Installer Permit permits the holder to install and service LP Gas systems, appliances, and other LP Gas equipment.

Renew online at: [lpgas.ok.gov](http://lpgas.ok.gov)

## Endorsements

Low Pressure   
  High Pressure   
  Rec. Vehicle   
  Meter Calibrator   
  Truck Inspector   
  Dispenser Operator   
  Rec Home Maint.

Name of Permit Holder: \_\_\_\_\_ Last 4 digits of your SSN: \_\_\_\_ \_

Full Company Name: \_\_\_\_\_ Federal ID: \_\_\_\_\_

Business Street Address: \_\_\_\_\_

\_\_\_\_\_ Street                                      City                                      State                                      Zip

Business Mailing Address: \_\_\_\_\_

(If different from above)      Street                                      City                                      State                                      Zip

Business Telephone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ E-mail: \_\_\_\_\_

List of Officers, Partners, or Owners: Check one: \_\_\_\_ Corporation/Assoc. \_\_\_\_ Partnership \_\_\_\_ Sole Proprietor \_\_\_\_ LLC

Name	Title	Address

Do you work out of a different location or address other than what is listed above? \_\_\_\_ Yes \_\_\_\_ No

\_\_\_\_\_ Location                                      Address                                      Phone Number

Insurance Co. Name: \_\_\_\_\_ Policy Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

All permit holders that dispense propane are required by Oklahoma Law to attend the annual Safety School if you have a **DO Endorsement**.

### READ BELOW AND INITIAL:

- \_\_\_\_\_ I agree to submit plans or drawings of all public building installations to the Oklahoma LP Gas Administration for approval before installation.
- \_\_\_\_\_ I agree to furnish Form 4's or other approved forms to the Oklahoma LP Gas Administration each time a leak test is required per the Oklahoma LP Gas Administration Rules and Regulations.
- \_\_\_\_\_ I understand that all permit holders that dispense propane (DO Endorsement) are required by Oklahoma Law to attend the annual Safety School.
- \_\_\_\_\_ I understand that this permit will expire on August 31st each year. If renewed after this date, I understand there will be an additional 25% late fee assessed.
- \_\_\_\_\_ I understand that no permit will be renewed after September 30<sup>th</sup>, without the approval of the LP Gas Administrator.
- \_\_\_\_\_ I certify that this information is true and correct. Any false or fraudulent statement or failure to comply with the rules and regulations promulgated by the Liquefied Petroleum Gas Board or Oklahoma Statutes Title 52, Chapter 8, Section 420.1 through 420.15 shall be cause for suspension or revocation of the permit held.

### OFFICE USE ONLY

PERMIT NUMBER: _____
EXPIRATION DATE: _____
DATE ISSUED: ____ / ____ / ____
PROCESSED BY: _____

Signed: \_\_\_\_\_ (By applicant)

Print Name: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Permit will NOT be issued unless all the above questions are answered, and a Certificate of Insurance is provided.

PERMIT RENEWAL FEE: \$70.00  
 ADD'L END. \$10/EA: \$\_\_\_\_ (1 END. INCLUDED)  
 TOTAL DUE: \$\_\_\_\_

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