STATE OF UTAH
APPLICATION FOR CERTIFICATE OF REGISTRATION
LIQUEFIED PETROLEUM GAS

Rev. 2009

Type of Application ☐ New ☐ Renewal	Original Date:
Applicant's Name _____	PE No
Home Address _____	P No
Street or PO Box	
City State Zip Code	

Telephone:		**Social Security Number:**	
Date of Birth:	**Age:**	**Sex:** ☐**M** ☐**F**	**Hair Color:**
Weight: **lbs**	**Height:** **ft** **in**		**Eyes Color:**

Name of Firm _____

Mailing Address _____
Street or PO Box

City State Zip Code

Have you ever been convicted of any crime? ☐ **Yes** ☐ **No**
If "yes," indicate the date, type and location of the offense, the arresting agency, and the court disposition and sentencing information.

Have you lived in another State within the last five years? ☐ **Yes** ☐ **No** **Please indicate where.**

READ THE FOLLOWING PARAGRAPH CAREFULLY BEFORE SIGNING THIS APPLICATION:
I affirm that this application contains no misrepresentation or falsification and the information is true and complete to the best of my knowledge and belief. I also understand and agree that failure to conduct business according to the adopted statutes and administrative rules of the State of Utah with regard to liquefied petroleum gas will subject myself to the possibility of the loss of my license and/or the possibility of criminal prosecution.

Signature **Date**

☐**Dispenser Test *Only* or renewal of Dispenser *Only***	**$20.00**
☐**Combination LPG certificate of registration ($40.00) and testing ($30.00)** Check the type(s) of certification applying for:	**$70.00**
☐Service Technician ☐Bobtail & Transport ☐HVAC / Plumber ☐Carburetion ☐RV ☐Dispenser	
Total	

MAIL TO: UTAH STATE FIRE MARSHAL, 5272 SOUTH COLLEGE DRIVE, SUITE 302, MURRAY, UT 84123-2611

Original Date		Renewal Date		Renewal Date		Renewal Date		Renewal Date	
Amount Paid		Amount Paid		Amount Paid		Amount Paid		Amount Paid	
Receipt #		Receipt #		Receipt #		Receipt #		Receipt #	
Date cert sent		Date cert sent		Date cert sent		Date cert sent		Date cert sent	