



# Class III Permit Renewal Application

Permits the holder to operate DOT cylinder filling station and delivery service

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

### 420:10.1.5.(b)(3)(D)

UN-ODORIZED LP GAS ENDORSEMENT  \$300.00  
UN-ODORIZED LP GAS ENDORSEMENT – BULK DELIVERY  \$300.00

Name of Applicant: \_\_\_\_\_ 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

Name and address of supplier from whom you buy LP Gas: \_\_\_\_\_

Name and location of plants where you load: \_\_\_\_\_

Total number of mobile equipment operating or will operate in Oklahoma: Cylinder Delivery Trucks: \_\_\_\_\_

List all storage containers/dispensers, size, and location: (use back if more space is needed):

WC Gallons	Location	WC Gallons	Location

Insurance Company: \_\_\_\_\_ Agent's Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Policy Number: \_\_\_\_\_ Expiration Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

### READ BELOW AND INITIAL:

\_\_\_\_\_ 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 420.17 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 above questions are answered and a Certificate of Insurance is provided.

PAYMENT METHODS: CHECK: OKLAHOMA L. P. GAS ADMINISTRATION  
3815 N SANTA FE, SUITE 117  
OKLAHOMA CITY, OK 73118

RENEWAL FEE:	\$300.00
ENDORSEMENTS:	\$ _____
TOTAL FEES:	\$ _____

EMAIL: [LPGAS.INFO@LPGAS.OK.GOV](mailto:LPGAS.INFO@LPGAS.OK.GOV) FAX: (405) 521-6037