



WILTON SIMPSON
COMMISSIONER

Florida Department of Agriculture and Consumer Services
Division of Consumer Services

**LP GAS CATEGORY IV
DEALER IN APPLIANCES AND EQUIPMENT
LICENSE APPLICATION**

Chapter 527, Florida Statutes
Rule 5J-20.004, Florida Administrative Code

Make Check or Money Order
payable to FDACS and remit
with form to:

FDACS
P.O. Box 6700
Tallahassee, Florida 32314-6700

Select one: ___ Initial Application	_____ License Renewal	LA # _____
Select one: ___ 1-year license (\$65 each)	_____ 2-year license (\$130 each)	_____ 3-year license (\$195 each)

INSTRUCTIONS: Complete this form (**PRINT OR TYPE**), and return it with all attachments and license fee(s) to the Bureau of Compliance [(850) 921-1600] at the address in the upper right-hand corner. If renewing one or more licenses, verify and update prepopulated information as necessary.

Business Name or DBA (<i>Name to be printed on license</i>):	Company Name or Corporation:
Physical Address (<i>Address of Business to be licensed</i>):	Company Mailing Address (<i>if different</i>):
City, State, Zip, County:	City, State, Zip, County:
Telephone: ()	Email Address:

Has the owner/applicant been convicted or pled nolo contendere to a felony as defined in Rule 5J-20.005, F.A.C., within the last five years? NO YES If yes, please attach additional pages and explain.

PRINT NAME OF OWNER/APPLICANT:	NAME OF PERSON PREPARING APPLICATION:	
SIGNATURE OF OWNER/APPLICANT:	PREPARER'S PHONE NO: ()	PREPARER'S EMAIL ADDRESS:
DATE OF APPLICATION:	PREPARER'S TITLE OR OFFICE HELD:	

F&A Use Only

Org Code: 42 10 06 25 000
EO: A2
Object Code: 002102