NICOLE "NIKKI" FRIED
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 ***(Name to be printed on license):***	**Company Name or Corporation:**
Physical Address ***(Address of Business to be licensed):***	**Company Mailing Address** ***(if different)*****:**
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

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EO: A2
Object Code: 002102