



South Carolina Department of Labor, Licensing and Regulation
South Carolina Liquid Petroleum Gas Board
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2022-2024 LP GAS DEALER RENEWAL APPLICATION

Renewal Requirements/Instructions:

- All license renewal applications must be accompanied by:
 - Check or Money Order, only, in the amount specified below made payable to SC LP Gas Board. Application fee is non-refundable. NO CASH IS ACCEPTED. A returned check fee of up to \$30, or an amount specified by law, may be assessed on all returned funds.
 - Copy of your current Certificate of Insurance (per S.C. Code of Laws 40-82-250).
 - If applicable, a written storage agreement in accordance with S.C. Code of Laws 40-82-240(C)
- Licenses must be renewed/postmarked on or before June 30, 2022.
- Incomplete Applications will be returned.

*****If you are also paying for employee permit renewals as well, you must include a complete renewal application for each employee. Failure to do so will result in your renewal packet being returned unprocessed.**

LICENSURE FEE INFORMATION	QUANTITY	TOTAL
Biennial Licensure Fee	1	\$400.00
Employee Fee (\$50 Per Employee/Per Permit)		
Late Fee (\$100 from July 1, 2022 – August 31, 2022)		
TOTAL		

BUSINESS INFORMATION

Name: _____ License No.: _____

Physical Address: _____
 Street City State Zip

Phone No.: _____ Email: _____

Mailing Address: _____
 Street City State Zip

Corporate Office Address: _____
 (If different from above) Street City State Zip

EMPLOYEES

Please list each permitted employee at this location (attach additional sheets if needed).

*****EMPLOYEES MUST COMPLETE A SEPARATE RENEWAL APPLICATION*****

Name	Permit Number	Renewal Fee Included for this individual?

In the event of an emergency, who is the primary contact person(s) for this license?

 Name Cell Phone Number Contact Email

 Additional Name Cell Phone Number Contact Email

STORAGE INFORMATION

Please complete the questions below for only the physical address associated with the license you are renewing.

- 1. Total storage amount (gal.) at this address: _____
- 2. Is the storage capacity at this address shared with any other licensed dealer in accordance with S.C. Code of Laws 40-82-240(A)(1)? Yes No

If Yes, please attach a written storage agreement that meets the requirements in S.C. Code of Laws 40-82-240(C).

- 3. If you do not have a minimum storage capacity of 30,000 water gallons at this address, what is the address and license number associated with your storage?

Street City State Zip Lic. No.

RESELLER INFORMATION

Please list all LP Gas Resellers serviced by this dealer location. Attach additional sheets as needed.

NAME	RESELLER LICENSE NUMBER (LPR)	EMPLOYEE PERMIT NUMBER (LPE)

BACKGROUND INFORMATION

All “Yes” answers must be accompanied with a written explanation and supporting legal documentation, i.e. court documents stating the disposition, payment arrangement correspondence, documented letter of dispute, etc.

- 1. Since your last renewal (or if this is your first renewal since your initial license application), has this company had a license, certification or registration cancelled, surrendered, revoked, suspended, restricted or disciplined by any federal, state, or local authority or operated without a proper license? Yes No
- 2. Since your last renewal (or if this is your first renewal since your initial license application), has this company been issued a Cease and Desist Order for unauthorized /unlicensed practice? Yes No
- 3. Since your last renewal (or if this is your first renewal since your initial license application), has this company been convicted in a court of competent jurisdiction of this or any other state, district or territory of the United States or of a foreign country of the offense of forgery, embezzlement, obtaining money under false pretenses, theft, extortion or conspiracy to defraud or other like offense? Yes No

INSURANCE

Certificate of Insurance verifying proof of \$500,000 general liability insurance, including manufacturer’s or contractor’s liability and product’s liability insurance (per S.C. Code of Laws 40-82-250) must be attached to this renewal application.

NOTE: The Insured shall notify the Board a minimum of 30 days prior to liability insurance being canceled, suspended or nonrenewable.

Name of Insurance Company: _____

Address: _____

Street City State Zip

Policy No.: _____ Expiration Date: _____

AFFIDAVIT

I HEREBY swear/affirm I have read all questions on this renewal application and have answered truthfully, accurately, and completely. I hereby acknowledge that failure to answer these questions truthfully, accurately and completely shall constitute cause for the initiation of disciplinary action against my South Carolina license.

Print name

Signature

Title

Date

PRIVACY NOTICE

South Carolina law requires the agency to collect personal information which is only disseminated as required by law. The South Carolina Freedom of Information Act ensures that the public has a right to access appropriate records and information possessed by a government agency. Therefore, some personal information on your renewal application and other documents on file may be subject to public scrutiny or release. The Department collects and disseminates personal information in compliance with The South Carolina Freedom of Information Act, the South Carolina Family Privacy Protection Act and other applicable privacy laws and regulations. Additionally, the Department shares certain information on the application with other governmental agencies for various governmental purposes, including research and statistical purposes.