



2026-2028 LP GAS RESELLER RENEWAL APPLICATION

Renewal Requirements/Instructions:

- Biennial licensure fee in the form of a check or money order only, made payable to SC LP Gas Board. Application fee is non-refundable. NO CASH IS ACCEPTED. A returned check fee of \$30, or an amount specified by law, may be assessed on all returned funds.
- License must be renewed/postmarked on or before June 30, 2026.
- Copy of your current Certificate of Insurance (per S.C. Code of Laws 40-82-250).

*****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	\$150.00
Employee Fee (\$50 Per Employee/ Per Permit)		
Late Fee (\$100 from July 1, 2026 – August 31, 2026)		
TOTAL		

Please include all necessary documentation with payment or renewal packet will be returned unprocessed.

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

DEALER (PROPANE SUPPLIER) INFORMATION

Dealer: _____ Dealer License No.: _____

Business Address: _____
 Street City State Zip

PERMITTED EMPLOYEE(S)

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?

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: _____

TRAINING

In accordance with the requirements of NFPA 58 4.4.2, have persons at this location whose primary duties include transferring LP Gas into or out of stationary containers completed training that includes all of the following components?

Yes No

- (1) Safe work practices
- (2) The health and safety hazards of LP-Gas
- (3) Emergency response procedures
- (4) Supervised, on-the-job training
- (5) An assessment of the person’s ability to perform the job duties assigned

**Please do not attach training documentation, this may be requested at a later date as part of a board audit.*

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 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, certificate, or registration? Yes No
2. Does this company have any unresolved complaints or charges pending before any professional or occupational licensing board or authority in this State or any other state or jurisdiction? Yes No
3. Since your last renewal (or if this is your first renewal, since your initial application), has this company been issued a Cease and Desist Order for unauthorized/unlicensed practice? Yes No
4. Since your last renewal (or if this is your first renewal, since your initial application), has this company been convicted of, or pled guilty or nolo contendere to a criminal offense in a court of competent jurisdiction in this or any other state, district or territory of the United States or of a foreign country? Yes No

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.