



South Carolina Department of Labor, Licensing and Regulation
South Carolina Liquid Petroleum Gas Board
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 llr.sc.gov/lp

RESELLER DISPENSER/ EQUIPMENT CHANGE FORM

This form is only for LICENSED LP Gas Resellers who are changing Dealers and/or LP Gas Dispensers/ Equipment. This form must be submitted and fees must be paid prior to an inspection being scheduled. Sites cannot be operational until an agent of the Board has given final site approval. If the physical address of the reseller location changes, you must submit a new application.

Include with application

Include a check or money order in the amount of \$100 payable to LP Gas Board. CASH IS NOT ACCEPTED
 If you would like to by credit card, please indicate below and enter an email address for the Board to send the invoice.

(All fees are non-refundable. A returned check fee of up to \$30, or an amount specified by law, may be assessed on all returned funds.)

Payment Type:

Enclosed Check or Money Order

Send invoice to (Email address is required): _____

You will receive an email confirmation that the payment has been processed. Your application will not be processed until payment is received.

RESELLER INFORMATION

Business Name: _____ License Number: _____

Business Address: _____ County: _____
Street/PO Box City State Zip

Phone Number: _____ Email (Required): _____

Permitted Employee Name(s): _____ Permit Number(s): _____

Person completing this section (print name): _____ Title: _____

Signature: _____ Date: _____

DEALER INFORMATION

This section must be completed by the Dealer or Dealer's Representative.

Dealer: _____ Dealer License Number: _____

Dealer Phone Number: _____ Email (Required): _____

1. Is this Reseller location ready for inspection? YES NO
 If no, what is the anticipated date of completion? _____
 (You must notify the Board when you're ready for inspection.)

2. Total Storage amount (gal.) at this location: _____

3. Has the container/equipment of the previous LP Gas Dealer been safely removed from the location? YES NO

If no, please explain: _____

4. Have all appropriate permits been pulled and inspections completed from the authority having jurisdiction (ie. electrical and foundation)? YES NO

5. 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

Person completing this section (print name): _____ Title: _____

Dealer Signature: _____ Date: _____