

**HERNANDO COUNTY REGISTRATION FORM**  
**L.P. GAS INSTALLER & DEALER**

DATE: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**PLEASE TYPE OR PRINT NEATLY**

State Certified License # \_\_\_\_\_ Driver's License # \_\_\_\_\_

Qualifier's Name \_\_\_\_\_

Qualifier's Home Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone # (\_\_\_\_) \_\_\_\_\_ Cell Phone # (\_\_\_\_) \_\_\_\_\_

Business Name \_\_\_\_\_

Business Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Business Phone # (\_\_\_\_) \_\_\_\_\_ FAX # (\_\_\_\_) \_\_\_\_\_ County \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

**PLEASE CHECK THE TYPE OF CERTIFICATE YOU HOLD:**

**L.P. GAS INSTALLER A:** Any person, firm or corporation installing, servicing, modifying, altering, or repairing apparatus, piping, tubing, appliances, equipment and LP gas storage tanks. This License includes the activities of selling or leasing of said equipment.

**L.P. GAS INSTALLER C:** Any person, firm or corporation involved in the installation of piping and/or tubing used to convey LP gas to appliances or equipment.

**Category 1 L.P. GAS DEALER:** Any person, firm or corporation involved in the following activities: sales of LP gas; cylinder exchange; sale or lease of LP gas appliances/equipment; installation, service and repair of LP gas appliances and equipment; carburetion equipment sales and installation; re-qualification of cylinders.

**PLEASE FURNISH WITH THIS REGISTRATION FORM THE FOLLOWING DOCUMENTS:**

1. Current copy of State Master License and Installer License.
2. Certificate of Liability Insurance and Workers' Compensation with Hernando County Building Division listed as the certificate holder, or a workers' compensation exemption for the qualifier.
3. Color copy of current driver's license.

I hereby confirm the above stated information is true and correct to the best of my knowledge.

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Signature of License Holder

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_

Sworn to (or affirmed) and subscribed before me by means of  physical presence or  online notarization, this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, by \_\_\_\_\_.

Personally Known OR  Produced Identification

Type of Identification Produced

(Notary Seal)

Signature of Notary Public