

State Fire Marshal
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Doug Jorgensen, State Fire Marshal

Jeff Colyer, M.D., Governor

AFFIDAVIT OF COMPLIANCE

IN THE COUNTY OF _____)

IN THE STATE OF _____)

I, _____, certify that the information included in the Permit Billing Statement is true and correct for facilities owned by _____.

Any changes to the Permit Billing Statement will be submitted on Addendum 1, Titled Propane License Change Form. By signing this affidavit, I am affirming that my previously listed business is in compliance with the Kansas Propane Safety and Licensing Act set forth on October 1, 2006.

FURTHER AFFIANT SAYETH NAUGHT:

Name Date