



Kansas Propane Safety and Licensing

Class 7 – Self-Serve Dispensing License

Permits the holder to operate a public self-serve dispenser

Full Company Name: (Include DBA)	
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List all dispenser tanks, size and location: (Attach list if necessary)

Name of Business (if different)	Physical Address	WC Gal.

Read and initial the following:

	We have read the Kansas statutes and rules that regulate this license and will abide by them
	We agree that all DOT cylinders, 300lbs or less, will be filled by weight, unless exempt by NFPA-58, and we will not fill any unsafe or illegal DOT cylinders and/or motor fuel containers
	We understand that this license is non-transferable and any change in name or ownership will be reported to the Office of the State Fire Marshal
	We understand that all employees that dispense LP Gas shall hold CETP certification or OSFM class certificate for the assigned duties

I certify that this information is true and correct. Any false or fraudulent statement or failure to comply with the rules and regulations promulgated by the Office of the State Fire Marshal or K.S.A. 55-1812 shall be cause for suspension or revocation of the license held.

Signed: _____ Printed Name: _____

Title: _____ Date: _____

DO NOT WRITE IN SPACE BELOW			
LICENSE #	YR:	PROCESSED BY:	