



STATE OF TENNESSEE
DEPARTMENT OF COMMERCE AND INSURANCE
DIVISION OF FIRE PREVENTION
ADMINISTRATIVE SERVICES SECTION
PERMITS AND LICENSES UNIT
500 JAMES ROBERTSON PARKWAY
NASHVILLE, TENNESSEE 37243-1159
Phone (615) 741-1322 – Fax (615) 741-1583

**Application for Dealer's License
for the Sale and Handling of Liquefied Petroleum Gas and/or Containers**

1. Complete the entire application and submit the proper fee. See the list of operation types below for the fee amount. Checks or money orders should be made payable to the Department of Commerce and Insurance
2. The applicant must be at least 21 years of age.
3. The applicant must submit evidence of at least three (3) years experience in the liquefied petroleum gas business through a signed written statement from supervisor(s) or equivalent who worked with this person for a period totaling three years, or evidence of attendance at safety and handling training classes designed and established by the National Propane Gas Association.
4. Submit a certificate of liability insurance indicating coverage in minimum limits of five hundred thousand dollars (\$500,000.00) in the case of injury to any one (1) person or one million dollars (\$1,000,000) in the case of any one (1) accident, or by the execution and filing of a bond for a like amount or by the deposit of one million dollars (\$1,000,000.00) cash with the state fire marshal's office. Detailed insurance requirements are located at the end of this application.
5. The applicant and RME (except Class V) must both pass a state examination proving adequate knowledge of regulations promulgated by the state fire marshal's office.
6. Submit evidence of a completed, approved DOT inspection for all standard bob-tailed vehicles.
7. In State Installation of storage tanks and accessories as set forth in NFPA 58 for bulk storage must be completed. Notify this office when you are ready for final inspection of installation (except Class V).
8. Out of State Installation of storage tanks and accessories as set forth in NFPA 58 for bulk storage must be completed. Please submit proof of a final inspection from your local, city, or state authority having jurisdiction over liquefied petroleum facilities and dealers."
9. Class I applicants must submit a plot plan showing proposed minimum 30,000 w.c. storage tank location, distance from property line, highway right of way, and buildings (50 feet minimum distance, 200 feet from main rail line or siding) pier and piping details, and industrial fencing of at least six (6) feet in height, with two means of access and egress. The location must be approved by the State Fire Marshal in advance of the application.
10. Class V applicants must submit blueprints and specifications in duplicate for each type of container, for approval by the Codes Enforcement Section of the State Fire Marshal's Office. (Tenn. Code Ann. §68-135-104).

Business Name _____

Ownership Type (partnership, corporation or sole proprietorship) _____

Mailing Address: Street _____

City _____ State _____ Zip _____

Site Address: Street _____

City _____ State _____ Zip _____

County _____ Telephone Number () _____ Fax () _____

Email Address _____

Date of Origin of Business ____/____/____ Supplier _____

Satellite Storage Location _____
Address _____ County _____

Operation Type:

Class I: ____ Bulk Storage (Minimum 30,000 water gal. storage), \$150.00, Applicant/RME Test Required

Class II: ____ Bottle Storage (Minimum 500 water gal. storage or approved vehicle mounted 500 water gal. container), \$35.00, Applicant/RME Test Required

Will this dealer be filling cylinders by weight from approved mobile equipment? ____ Yes ____ No

Class III: ____ Service Station Operations (Refrigeration and/or motor fuel), \$35.00, Applicant/RME Test Required

Class IV: ____ LP Refineries, Jobbers, Sellers, \$150.00, Applicant/RME Test Required

*To be filled out by the **applicant**, or for a firm or corporation, the person charged with active management*

Name:_____

Home Address: _____

City: _____State: _____Zip: _____

Phone # () _____

Email Address _____Social Security # _____Birth Date_____

*The applicant must designate a **Responsible Managing Employee (R.M.E.)** in this box (except Class V).
All R.M.E's must maintain compliance with state Liquefied Petroleum Gas Safety Regulations, Rule 0780-2-17.03.
(Use space on back of application for additional R.M.E.s if needed.)*

Name:_____

Print Full Name _____Certification Number _____

Home Address: _____

City: _____State: _____Zip: _____

Phone # () _____

Email Address _____Social Security # _____Birth Date_____

Applicant’s Signature

Date

ALL LICENSE’S EXPIRE MARCH 31 OF EACH YEAR

Detailed Insurance Requirements

<p><u>Class I</u></p> <p>1. Manufacturers’ and contractors’ bodily injury liability insurance. Each person.....\$ 500,000 Each accident.....1,000,000</p> <p>2. Manufacturers’ and contractors’ property damage liability insurance. Each accident.....\$ 500,000 Aggregate.....1,000,000</p> <p>3. Products bodily injury liability insurance. Each person.....\$ 500,000 Each accident.....1,000,000 Aggregate.....1,000,000</p> <p>4. Products property damage liability insurance. Each person.....\$ 500,000 Aggregate.....1,000,000</p> <p>5. Automobile bodily injury liability insurance. Each person.....\$ 500,000 Each accident.....1,000,000</p> <p>6. Automobile property damage liability insurance. Each accident.....\$ 20,000</p>	<p><u>Class II</u></p> <p>1. Products bodily injury liability insurance. Each person.....\$ 500,000 Each accident.....1,000,000 Aggregate.....1,000,000</p> <p>2. Products property damage liability insurance. Each accident.....\$ 500,000 Aggregate.....1,000,000</p> <p>3. Automobile bodily injury liability insurance. Each person.....\$ 500,000 Each accident.....1,000,000</p> <p>4. Automobile property damage liability insurance. Each accident.....\$ 20,000</p>
<p><u>Class III</u></p> <p>1. Manufacturers’ and contractors’ bodily injury liability insurance. Each person.....\$ 500,000 Each accident.....1,000,000</p> <p>2. Manufacturers’ and contractors’ property damage liability insurance. Each accident.....\$1,000,000 Aggregate.....1,000,000</p> <p>3. Products bodily injury liability insurance. Each person.....\$ 500,000 Each accident.....1,000,000 Aggregate.....1,000,000</p> <p>4. Products property damage liability insurance or garage liability bodily injury liability insurance. Each person.....\$ 500,000 Each accident.....1,000,000 Aggregate.....1,000,000</p> <p>5. Garage liability property damage liability insurance. Each accident.....\$ 1,000,000</p>	<p><u>Class IV</u></p> <p>1. Manufacturers’ and contractors’ bodily injury liability insurance. Each person.....\$ 500,000 Each accident.....1,000,000</p> <p>2. Manufacturers’ and contractors’ property damage liability insurance. Each accident.....\$ 500,000 Aggregate.....1,000,000</p> <p>3. Products bodily injury liability insurance. Each accident.....\$ 500,000 Aggregate.....1,000,000</p> <p>4. Products property damage liability insurance. Each person.....\$ 500,000 Aggregate.....1,000,000</p> <p>5. Automobile bodily injury liability insurance. Each person.....\$ 500,000 Each accident.....1,000,000</p> <p>6. Automobile property damage liability insurance. Each accident.....\$ 20,000</p>
<p><u>Class V</u></p> <p>1. Manufacturers’ and contractors’ bodily injury liability insurance. Each person.....\$ 500,000 Each accident.....1,000,000</p> <p>2. Manufacturers’ and contractors’ property damage liability insurance. Each accident.....\$ 1,000,000 Aggregate.....1,000,000</p> <p>3. Products bodily injury liability insurance. Each person.....\$ 500,000 Each accident.....1,000,000</p>	

Aggregate.....1,000,000



500 James Robertson Parkway
Nashville, TN 37243
Tel: 615-741-2981
<http://www.tn.gov/commerce/>

ELIGIBILITY VERIFICATION FOR ENTITLEMENTS ACT ATTESTATION
(Pursuant to Tenn. Code Ann. § 4-58-103)

The Eligibility Verification for Entitlements Act, passed in 2012, requires every state governmental entity to verify that each applicant who applies for a state public benefit is a United States citizen or lawfully present in the United States. As such, all individuals applying for a license, registration, certification, or other benefit from the Department of Commerce and Insurance, Division of Fire Prevention ("Division") must complete this form. In addition, all owners of "pass-through entities" (such as sole proprietorships, partnerships, limited liability companies ("LLCs"), and S corporations) must complete the form. If you have questions as to whether you are required to complete this form, please contact the Division's Permits and Licensing Section at (615) 741-2981 or SFMO.permits-licensing@tn.gov.

I hereby attest under penalty of perjury that I am (select one):

- ☐ A United States citizen, and my social security number is ____-____-____.
- ☐ A qualified alien as defined in Tenn. Code Ann. § 4-58-102¹ and I am providing one (1) or more forms of documentation of identity and immigration status listed on the following page.
- ☐ A foreign national not physically present in the United States. (Further, I understand that should I ever become physically present in the United States while I hold this license, registration, or other benefit, I agree to immediately contact the issuing agency and provide documentation to confirm my status as a qualified alien.)

I further attest that I understand that submitting false information or omitting pertinent or material information in connection with this application or any violation of the Eligibility Verification for Entitlements Act may result in the revocation of any license, registration, certification, or other benefit issued to the applicant. A person who willingly makes a false, fictitious, or fraudulent statement or representation of United States citizenship may be prosecuted under 18 U.S.C. § 911 and/or the False Claims Act, Tenn. Code Ann. §§ 4-18-101, *et seq.*

Printed Name

Applicant's Signature

Date

¹ Qualified alien means "a qualified alien as defined by 8 U.S.C. § 1641(b)" or "an alien or nonimmigrant eligible to receive state or local public benefits under 8 U.S.C. § 1621(a)." Pursuant to those statutes, this status includes, but is not necessarily limited to:

- An alien who is lawfully admitted for permanent residence under the Immigration and Nationality Act [8 U.S.C. § 1101 *et seq.*];
- An alien who is granted asylum under Section 208 of the Immigration and Nationality Act [8 U.S.C. § 1158];
- A refugee who is admitted to the United States under Section 207 of the Immigration and Nationality Act [8 U.S.C. § 1157];
- An alien who is paroled into the United States under Section 212(d)(5) of the Immigration and Nationality Act [8 U.S.C. § 1182(d)(5)] for a period of at least one (1) year;
- An alien whose deportation is being withheld under Section 243(h) of the Immigration and Nationality Act [8 U.S.C. § 1253] (as in effect immediately before the effective date of Section 307 of Division C of Public Law 104-208 or Section 241(b)(3) of the Immigration and Nationality Act [8 U.S.C. § 1231(b)(3)] (as amended by Section 305(a) of Division C of Public Law 104-208);
- An alien who is granted conditional entry pursuant to Section 203(a)(7) of the Immigration and Nationality Act [8 U.S.C. § 1153(a)(7)] as in effect prior to April 1, 1980;
- An alien who is a Cuban and Haitian entrant (as defined in Section 501(e) of the Refugee Assistance Act of 1980);
- A nonimmigrant under the Immigration and Nationality Act [8 U.S.C. § 1101, *et seq.*];
- An alien who is paroled into the United States under Section 212(d)(5) of the Immigration and Nationality Act [8 U.S.C. § 1182(d)(5)] for less than one year.

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Additional Required Documentation:

If you are claiming United States citizenship, you must present one (1) of the following:

- **Social security number (If you provided your social security number on the previous page, no additional documentation is required.** However, please be aware that efforts may be made to verify any such number.);
- A valid Tennessee driver's license or photo identification issued by the Department of Safety;
- A valid driver's license or photo identification license from another state where the issuance requirements are at least as strict as those in Tennessee, as determined by the Department of Safety;
- An official birth certificate issued by a state, jurisdiction, or territory of the United States, including Puerto Rico, United States Virgin Island, Northern Mariana Islands, American Samoa, Swains Island, or Guam (except that Puerto Rican birth certificates issued before July 1, 2010, shall not be recognized);
- A United States government-issued certified birth certificate;
- A valid, unexpired United States passport;
- A United States certificate of birth abroad (DS-1350 or FS-545);
- A report of birth abroad of a citizen of the United States (FS-240);
- A certificate of citizenship (N560 or N561);
- A certificate of naturalization (N5550, N570, or N578);
- A United States citizen identification card (I-197, I-179); or
- Any successor document of those listed at Tenn. Code Ann. § 4-58-103(c)(4)-(9).

If you are claiming qualified alien status, you must present two (2) of the following forms of documentation of identity and immigration status, as determined by the United States Department of Homeland Security to be acceptable for verification through the SAVE program:

- I-327 (Reentry permit);
- I-551 (Permanent Resident Card);
- I-571 (Refugee Travel Document);
- I-766 (Employment Authorization Card);
- Certificate of Citizenship;
- Naturalization Certificate;
- Machine Readable Immigrant Visa (with Temporary I-551 Language);
- Temporary I-551 Stamp (on passport or I-94);
- Unexpired foreign passport;
- WT/WB Admission Stamp in unexpired foreign passport;
- I-20 (Certificate of Eligibility for Nonimmigrant (F-1) Student Status);
- DS-2019 (Certificate of Eligibility for Exchange Visitor (J-1) Status); or
- Any other document determined by the U.S. Department of Homeland Security to be acceptable through the Systematic Alien Verification for Entitlements (SAVE) Program created pursuant to the federal Immigration Reform and Control Act of 1986.
- **Note: Neither a driver's license nor a social security number or card are acceptable forms of documentation.**

If you are claiming qualified alien status but are unable to present two (2) forms of documentation listed above (for the claim of qualified alien status), then you shall present at least one (1) such document, which shall then be verified through the SAVE program. Failure to provide two (2) forms of documentation will result in a delay to determining eligibility for licensure.

If you are claiming that you are a foreign national not physically present in the United States, please contact the program issuing the license, registration, certification, or other benefit for which you are applying to provide such documentation as may be required to verify such status.