



500 James Robertson Parkway, 10<sup>th</sup> Floor  
 Nashville, TN 37243  
 Tel: 615-741-2981  
<http://www.tn.gov/commerce/>

FOR OFFICE USE ONLY

LICENSE TYPE   
 TRANSACTION TYPE   
 FILE NUMBER \_\_\_\_\_  
 ENTITY NUMBER \_\_\_\_\_  
 APPLICATION NUMBER \_\_\_\_\_  
 AMOUNT PAID \_\_\_\_\_

Name \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City, TN Zip \_\_\_\_\_

Date: \_\_\_\_\_  
 Site Location: \_\_\_\_\_ (BS  
 Address)

## LICENSE RENEWAL NOTICE

### LP Gas Dealer Classification:

LP Gas Class I \$150.00 \_\_\_\_\_  
 LP Gas Class II \$35.00 \_\_\_\_\_  
 LP Gas Class III \$35.00 \_\_\_\_\_  
 LP Gas Class IV \$150.00 \_\_\_\_\_  
 LP Gas Class V \$100.00 \_\_\_\_\_

Responsible Managing Employee(s) (RME) on File:  
 (Supporting License)(Not required for Class V)

Applicant on File:

### THIS IS THE ONLY RENEWAL NOTICE YOU WILL RECEIVE.

Failure to complete each step outlined below will result in delayed processing and possible expiration of your license. This form is to be used for renewals only. New applicants must submit a separate application form.

**RENEW ONLINE AT <https://core.tn.gov> OR MAIL THE RENEWAL FORM AND PAYMENT AT LEAST TWENTY ONE (21) BUSINESS DAYS IN ADVANCE OF THE EXPIRATION DATE. RENEWALS RECEIVED AFTER THE EXPIRATION DATE WILL NOT BE PROCESSED AND THE LICENSE WILL EXPIRE.**

Expiration Date:		Renewal Fee: \$
<b>Step 1:</b> If your mailing address has changed, enter it in the space below:	<b>Step 2:</b> If your RME or applicant is not listed above, fill out the new information below:	
	RME(s):	
	File Number(s):	
	Applicant:	
<b>Phone #:</b>	File Number:	
<b>E-mail:</b>	* A new application must be filed for new applicants. Contact the office for more information.	

**Step 3:** Mail this form with a check made payable to the Department of Commerce and Insurance in the enclosed envelope.

I hereby certify I have read and understand the provisions of law relating to the LP Gas Dealer program. This application is made in good faith, and the answers and statements made herein are full, correct and true to the best of my knowledge. I understand that any and all information herein required by the LP Gas Dealer program is considered part of my application.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_