



Florida Department of Agriculture and Consumer Services  
Division of Consumer Services

NICOLE "NIKKI" FRIED  
COMMISSIONER

**LP GAS QUALIFIER AND MASTER  
QUALIFIER REGISTRATION APPLICATION**

Sections 527.02 and 527.0201, Florida Statutes  
Rule 5J-20.004, Florida Administrative Code

Remit Payment Online at:  
[www.fl-ag-online.com](http://www.fl-ag-online.com)

or

Check or Money Order payable  
to FDACS and remit with form  
to:

FDACS  
PO Box 6700  
Tallahassee, FL 32314-6700

To schedule an examination, complete this form (print or type) and return to the above address with the examination fee or schedule your exam online at [www.fl-ag-online.com](http://www.fl-ag-online.com). **If renewing your qualifier or master qualifier certification online, please go to [www.FDACS.gov](http://www.FDACS.gov) (renewals only).** PLEASE NOTE: Proof of approved 16 continuing education hours must be included. Questions, please contact Bureau of Compliance (850) 921-1600.

<b>Name: First</b>	<b>Middle:</b>	<b>Last:</b>
<b>Mailing Address:</b>		<b>Applicant Email Address:</b>
<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Phone No:</b> (     )	<b>Company Email Address:</b>	
<b>Company's LP Gas License #:</b>	<b>Company Name:</b>	
<b>Company Phone:</b> (     )	<b>Company Address:</b>	

CheckOne	Exam Type / Qualifier Renewal	Fee
	Q1: Dealer Exam	\$20
	Q1-R.V.: R.V. Dealer Exam	\$20
	Q2: Dispenser Exam	\$20
	Q5: Service/Installation Exam	\$20
	M1: Master Qualifier Exam: Dealer <b>Qualifier ID #</b> _____	\$30
	M1-R.V.: Master Qualifier Exam: R.V. Dealer <b>Qualifier ID #</b> _____	\$30
	M5: Master Qualifier Exam: Installer <b>Qualifier ID#</b> _____	\$30
	<input type="checkbox"/> Master Qualifier Renewal ID# _____ <input type="checkbox"/> Qualifier Renewal ID# _____	\$30 / \$20

F&A Use Only

Org Code: 42 10 06 25 000  
EO: A2  
Object Code: 001171      \$20/\$30

**PLEASE CHOOSE AN EXAMINATION SITE:**

- Tallahassee     Ocala (May only)     Authorized Agent

**MASTER QUALIFIER FOR A LICENSED COMPANY** (Complete this section if you are applying for the Master Qualifier position for a licensed company).

This form is submitted as evidence that I am eligible to hold the position of Master Qualifier with the company listed on page 1 of this application, and that I am the (check one) \_\_\_\_\_ owner, \_\_\_\_\_ manager, \_\_\_\_\_ supervisor, \_\_\_\_\_ otherwise primarily responsible party for the operations and business activities of the licensed location or licensed applicant listed above.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**First time** Master Qualifier applicants must have for a minimum of three years of verifiable experience in the liquefied petroleum industry within the 10 years preceding submission of this application or hold a professional certification in safety installation, maintenance, service or repair of LP gas equipment, systems, or appliances by an LP gas industry manufacturer.

**Has the applicant been convicted or pled nolo contendere to a felony as defined in Rule 5J-20.005, F.A.C., within the last five years? If yes, please explain.**

NO     YES \_\_\_\_\_

**Signature of Applicant:** \_\_\_\_\_

**DOCUMENTATION OF CONTINUING EDUCATION FOR RENEWAL OF QUALIFIER/MASTER QUALIFIER**

(Attach additional sheets as necessary using the same format below to complete the following CEU training information.)

Date of Training	Total Hours	Course ID (if applicable)	COURSE TITLE