Department of Public Safety and Corrections
Liquefied Petroleum Gas Commission

JOHN BEL EDWARDS
GOVERNOR

DON P. ROBIN
EXECUTIVE DIRECTOR

RECIPROCAL SAFETY INSPECTION APPLICATION FORM

Dealer Name _____

Dealer Address _____

_____

Dealer Number _____

We are applying for (a) safety inspection(s) by reciprocal agreement. Attached is/are documentation acceptable to the Louisiana Liquefied Petroleum Gas Commission stating that (a) safety inspection(s) has/have been performed by a state that has a reciprocal agreement with Louisiana for such inspections.

NOTE: The following conditions must be met for the safety inspection request(s) to be granted:

1. Documention must be attached and must be acceptable to the LA L.P. Gas Comm.
2. The inspection(s) must have been performed 90 days prior to or 90 days after the registration(s) with Louisiana.
3. The subject equipment must be currently registered with the LA L.P. Gas Comm.
4. The company requesting the reciprocal safety inspection(s) must be a current permit holder in Louisiana.
5. The request(s) is/are for transport inspection(s) only.
6. The following must be given for each reciprocal safety inspection requested.

Trailer Unit #	Serial #	Water Capacity (Gallons)	Manufacturer Name	Current LA Registration Tag #	Reciprocal State

CERTIFICATION: I certify that the above is true and correct and understand the conditions of the reciprocal safety inspection.

_____ _____

SIGNATURE OF PERSON MAKING CERTIFICATION **DATE**

P.O. BOX 66209, BATON ROUGE, LA 70896
Phone (225) 925-4895 Fax (225) 925-4898