



EXAM APPLICATION

LIQUEFIED PETROLEUM GAS

Mail Fee and Forms To:

Oregon State Fire Marshal
Regulatory Services Unit – LPG Program
PO Box 4395 Unit 09
Portland, OR 97208-4395

Contact Information:

Phone: 503-378-3473
Fax: 503-373-1825
Email: OSFM.LP@OSFM.oregon.gov

APPLICATIONS

Complete a separate application for each applicant and mail to the address above.

FEES

There is a \$55 application exam fee. Include a check or money order with this application. This fee is not refundable or transferable.

EXAM INSTRUCTIONS

After receiving payment, detailed instructions will be emailed to the address provided. The address must be the applicant's own email address. The system will not allow multiple users for one email address.

EXAM MATERIALS

Oregon Administrative Rules (OAR) | Oregon Revised Statutes (ORS)

OSFM provides links to OAR and ORS, but not NFPA materials. The examinees are responsible for their own books.

National Fire Protection Association (NFPA) #54 newest edition, #58 newest edition, and #1192 newest edition (RV exam only). NFPA books may be purchased from the resources below. OSFM does not endorse any source.

[National Fire Protection Association](https://www.nfpa.org) – 1-800-344-3555

[Building Technical Bookstore](https://www.buildingtechnical.com) – 1-800-275-2665

[Powell's Technical Bookstore](https://www.powellbooks.com) –503-228-3906 ext. 4000

EXAM TYPES

Company Representative – Required for one individual from a company to engage in the business of propane work in Oregon. Each individual company site must have its own company representative. (Requires OAR, ORS, and NFPA 58)

Master Fitter – Required for all who perform liquefied petroleum gas (LPG) fitting or venting work, install, repair, or remodel piping or venting. This license covers all areas of LPG work. (Requires OAR, ORS, NFPA 54, and NFPA 58)

HVAC Fitter – Required for all individuals who perform LPG work on HVAC equipment, including hearth products. (Requires OAR, ORS, NFPA 54, and NFPA 58)

IC Fitter (Internal Combustion) – Required for all who work on internal combustion engines of forklifts and vehicles. (Requires OAR, ORS, and NFPA 58)

Truck Equipment Operator – Required for all who operate LPG delivery equipment installed on a motorized vehicle. (Requires OAR, ORS, NFPA 54, and NFPA 58)

Please complete reverse side.



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APPLICANT DETAILS *(all fields required)*

Name:	Phone:
Email:	
Signature:	Date:
<i>By signing this application as the applicant, you certify you will be the person taking the requested online examination.</i>	
Employee LPG Start Date:	

COMPANY INFORMATION *(all fields required)*

Company OSFM ID:	Company Name:
Location:	Representative Name:
<i>By signing this application as the company representative, you certify the applicant will be the person who will take the online exam.</i>	
Company Representative Signature:	Date:
Company Representative Email:	

SELECT ALL REQUESTED EXAM(S)

Check this box if the exam requested is a re-take

- | | |
|--|---|
| <input type="checkbox"/> Company Representative | <input type="checkbox"/> HVAC Fitter |
| <input type="checkbox"/> Company Rep./Master Fitter | <input type="checkbox"/> IC Fitter |
| <input type="checkbox"/> Company Rep./HVAC Fitter | <input type="checkbox"/> Truck Equipment Operator |
| <input type="checkbox"/> Company Rep./IC Fitter | <input type="checkbox"/> Master Fitter / Truck Equipment Operator |
| <input type="checkbox"/> Company Rep./Truck Equipment Operator | <input type="checkbox"/> Safety (Required) |
| <input type="checkbox"/> Company Rep./Master Fitter/Truck Equipment Operator | <input type="checkbox"/> Master Fitter |

FEE: \$55 PER EXAM APPLICATION (LICENSE NOT INCLUDED)

Select Payment Type: Check # _____ Online Payment

NEW COMPANY Details

(All fields required for new companies only)

Location Site Address:		
City:	State:	Zip Code:
Location Mailing Address:		
City:	State:	Zip Code:

NOTES: