



# State of Maine

## MAINE FUEL BOARD

The information in this application packet is to assist you in completing your application. It is recommended that you review applicable laws and rules for further guidance.

### APPLICATION INSTRUCTIONS FOR:

## Change of Owner of Dispensing Station Facility

Do not return the informational pages with your application; they are for your information only.

Return the application and documents listed on the checklist only.

Department of Professional and Financial Regulation  
Office of Professional and Occupational Regulation  
(Mailing address) 35 State House Station, Augusta, ME 04333  
(Office location) Gardiner Annex, 76 Northern Avenue, Gardiner, Maine 04345  
Office Direct Line (207) 624-8627  
TTY users call Maine relay 711

Web address: <https://www.maine.gov/pfr/professionallicensing/professions/fuel/index.html>  
Email: [fuel.board@maine.gov](mailto:fuel.board@maine.gov)

**Revised 02/2020**

## **GENERAL INSTRUCTIONS AND INFORMATION**

### **10 DAY NOTIFICATION REQUIREMENTS:**

Pursuant to 10 M.R.S §8003-G, any change in name, address, email address, criminal convictions, disciplinary actions, or any material change set forth in your original application for licensure must be reported to The Maine Fuel Board within 10 days.

### **IMPORTANT INFORMATION REGARDING LICENSE DELIVERY:**

***The Maine Fuel Board does not print licenses.*** The Dispensing Station license will be sent to the dispensing station owner at the email address provided to us on the application. The license will arrive from email sender address: noreply@maine.gov. The attachment with this email is the license where you may open it and print the dispensing station license. If you do not locate the license in your inbox, please check your junk/spam folders for this email. Please either save our email address (noreply@maine.gov) in your contacts or as a safe sender to prevent the license from being directed to your junk/spam folders.

### **LICENSE RENEWAL INFORMATION:**

Approximately sixty (60) days prior to the expiration of the dispensing station license a courtesy renewal reminder will be sent to the dispensing station owner by email. It is important that you maintain a current email on file, or you risk not being able to receive the renewal reminder. You do not need to wait for a renewal reminder to renew the dispensing station license. The online renewal opens sixty days prior to the license expiring and you may renew online. Failure to receive a courtesy renewal reminder notice does not impact your responsibility to renew the dispensing station license in a timely manner.

### **MAINE FUEL BOARD LAWS AND RULES:**

The Maine Fuel Board cannot provide you with a hard copy of laws and rules. However, all applicable laws and rules are available online, and may be accessed via the websites listed below. You are responsible for knowing and complying with all board laws and rules throughout licensure of the dispensing station. Please note, all laws and rules may be subject to change without notice and it is strongly advised to periodically check for updates.

#### **Maine Fuel Board Laws and Rules:**

<https://www.maine.gov/pfr/professionallicensing/professions/fuel/pdf/Board%20Laws%20and%20Rules%202019.pdf>

#### **Title 5, Chapter 375: Maine Administrative Procedure Act:**

<https://legislature.maine.gov/legis/statutes/5/title5ch375sec0.html>

## **Title 10, Chapter 901: Department of Professional and Financial Regulation:**

<http://legislature.maine.gov/statutes/10/title10ch901sec0.html>

### **APPLICATION PROCESSING TIME:**

Your application has a greater chance of being processed expeditiously if it is complete and all supporting documents are included. To ensure that The Maine Fuel Board received your application please visit our website at <https://www.pfr.maine.gov/almsonline/almquery/welcome.aspx?board=4320>. After your application has been received the dispensing station name will appear when you “Search Companies” on the dispensing station name as you entered it on your application. The status will appear as “Pending.” This is not an actual license approval at this point; it is simply a verification that an application has been received and is in the queue for review. When a license is issued the status will change from pending to active.

**Please refrain from calling our office to “check” on your application as these calls only serve to slow our ability to review and process applications.**

## **SPECIFIC INFORMATION**

### **DISPENSING STATION OWNER RESPONSIBILITIES:**

- A. A dispensing station operating in the State must comply with section 18107 and the standards and rules adopted by the board, including, but not limited to, NFPA standards, Numbers 54 and 58, and amendments to and replacements of those standards.
- B. The on-site operator of a dispensing station must be trained to be the limited operator of the facility. The limited operator is responsible for training other dispensing station employees and documenting that training. The training must include the use of a manual prepared by a regional propane gas association, a video prepared by a national propane gas association or equivalent materials approved by the board. The training documentation must be kept at the dispensing station.
- C. The owner of a dispensing station must file a new application for licensure with the board within 30 days when:
  - (1) A dispensing station is relocated; or
  - (2) A dispensing station undergoes major repair or renovation.
- D. No person under the age of 18 years old shall operate a dispensing station.
- E. A dispensing station license must be conspicuously displayed with the name of the dispensing station, license number and expiration date visible at all times.

## **LIMITED OPERATOR TRAINING AND INFORMATION:**

### **On-Site Limited Operator Required**

Each dispensing station must employ an on-site limited operator who is responsible for training on-site dispensing station operators. The training documentation required will include the Propane Gas Association of New England's dispensing station operator's manual and the National Propane Gas Association Video entitled "Dispensing Propane Safely" or equivalent materials approved by the Board. A record of this training for all operators must be maintained on-site at all times and be available for inspection.

**The gas supplier must provide refresher training to the limited operator prior to each license renewal.** The training must be documented and signed by the gas supplier indicating that the on-site operator of the dispensing station has been trained. A copy of the training record must remain on site with the dispensing station license.

### **Change of Limited Operator**

When a change of limited operator occurs, a change of limited operator application must be submitted on a form provided by the Board and signed by the gas supplier indicating that the on-site operator of the dispensing station has been trained as required by 32 MRSA §18142(2)(B) to be the limited operator of the facility.

- The opt out of the training affidavit is only for Propane & Natural Gas Technicians with either the Delivery or Plant Operator authority.
- The opt out of the training affidavit does not apply to a person who was or is a "Limited Operator" of a dispensing Station.
- Training for Limited Operators needs to be carried out by a Propane & Natural Gas Technician, **licensed with either the Delivery or Plant Operator authority.**
- Training for the Limited Operator needs to be carried out and documented with the affidavit **as part of the renewal process every two years.**

## **CHANGE OF OWNERSHIP APPLICATION GUIDE, INSTRUCTIONS AND CHECKLIST**

**IMPORTANT NOTICE:** Incomplete applications will not be considered. Pursuant to Maine Fuel Board Rules Chapter 4 § 4.13.2 – Incomplete or Illegible Applications "Incomplete or illegible applications will be returned to the applicant together with any attachments."

**THE FOLLOWING DOCUMENTS MUST BE SUBMITTED IN THEIR ENTIRETY TO THE MAINE FUEL BOARD FOR LICENSURE CONSIDERATION:**

**Change of Owner of Dispensing Station Facility Application - page 1 :**

- a) New facility name, physical address, telephone number and new facility federal identification number of dispensing station; and
- b) Former facility name (current name on record with the Board), dispensing station license number (begins with DIS), etc.; and
- c) actual owner of dispensing station equipment including name, mailing address, telephone number, email address, dispensing station license number (begins with DIS); and
- d) Name of propane supplier; and
- e) Address of propane supplier; and
- f) Effective date of change of ownership; and
- g) signed and dated by the owner of the dispensing station equipment (or legal representative thereof).

**Change of Limited Operator Application for Dispensing Station License – page 2**

- a) name, date of birth (a Limited Operator must be at least 18 years old), home mailing address, telephone number and email address of the proposed Limited Operator, dispensing station license number, and signed and dated by the Limited Operator **after** the proposed Limited Operator has been trained by the gas supplier. The training documentation required will include the Propane Gas Association of New England’s dispensing station operator’s manual and the National Propane Gas Association Video entitled “Dispensing Propane Safely” or equivalent materials approved by the Board. A record of the training must be maintained on-site at all times and be available for inspection; and
- b) “Affidavit” portion of the application – **After** the proposed Limited Operator has been properly **trained** in accordance with 32 M.R.S. § 18142(2)(B) **by a representative of the gas supplier** who is **also licensed** by the Maine Fuel Board **as a Propane and Natural Gas Technician** with either the **Plant Operator or Delivery Technician** authority - enter name of the proposed Limited Operator, the Limited Operator should sign and date certifying to receipt of the requisite training and print the name of the facility (dispensing station name). The Propane and Natural Gas Technician who provided the training should sign and date certifying to the requisite training, enter their Propane and Natural Gas Technician license number, print their name and print the name of the gas supplier company the Propane and Natural Gas Technician works for.



**Propane Dispensing Station Affidavit – page 3**

- a) No person under the age of 18 years old shall operate a dispensing station.
- b) Dispensing station must employ an on-site limited operator who is responsible for training on-site dispensing station operators. The training documentation required includes the Propane Gas Association of New England's dispensing station operator's manual and the National Propane Gas Association Video entitled "Dispensing Propane Safely" or equivalent materials. A record of this training for all operators must be maintained on-site at all times and be available for inspection.
- c) Each trained dispensing station operator's name will be legibly printed or typed on the Propane Dispensing Station Affidavit.
- d) Dispensing Station Affidavit must be signed by the Limited Operator assuming responsibility for and affirming training of on-site dispensing station operators and include typed/printed name of Limited Operator and the name of the Dispensing Station.

# CHANGE OF OWNER OF DISPENSING STATION FACILITY

STATE OF MAINE  
DEPARTMENT OF PROFESSIONAL & FINANCIAL REGULATION  
OFFICE OF PROFESSIONAL & OCCUPATIONAL REGULATION

## MAINE FUEL BOARD

35 State House Station  
Augusta, ME 04333  
Tel. (207)624-8627  
Email: fuel.board@maine.gov  
Maine Relay 711 (TTY)

NEW NAME OF FACILITY:		
ADDRESS OF FACILITY:		
CITY	STATE	ZIP
PHONE #	FEDERAL I.D. NUMBER:	

FORMER NAME OF FACILITY:	LICENSE#	
CITY	STATE	ZIP

NAME OF OWNER OF DISPENSING STATION EQUIPMENT:		
ADDRESS OF OWNER		
CITY	STATE	ZIP
PHONE #	EMAIL:	LICENSE # DIS _____

NAME OF PROPANE SUPPLIER (BRANCH SERVING DISPENSER): \_\_\_\_\_  
ADDRESS OF SUPPLIER: \_\_\_\_\_

EFFECTIVE DATE: \_\_\_\_\_

By my signature, I hereby certify that the information provided on this application is true and accurate to the best of my knowledge and belief. By submitting this application, I affirm that the Office of Professional & Occupational Regulation will rely upon this information for issuance of my license and that this information is truthful and factual. I also understand that sanctions may be imposed including denial, fines, suspension or revocation of my license if this information is found to be false.

**SIGNATURE OF OWNER:**

**DATE:**

# CHANGE OF LIMITED OPERATOR APPLICATION FOR DISPENSING STATION

STATE OF MAINE  
DEPARTMENT OF PROFESSIONAL & FINANCIAL REGULATION OFFICE OF PROFESSIONAL &  
OCCUPATIONAL REGULATION **MAINE FUEL BOARD**

PLEASE NOTE: IT IS THE RESPONSIBILITY OF THE DISPENSING STATION OWNER TO ENSURE THAT LIMITED OPERATORS ARE REGISTERED WITHIN 14 DAYS OF HIRE IN ORDER TO DISPENSE PROPANE. OPERATOR TRAINING SHALL OCCUR PRIOR TO EVERY RENEWAL.

LIMITED OPERATOR INFORMATION (please print)			
FULL LEGAL NAME	<i>FIRST</i>	<i>MIDDLE INITIAL</i>	<i>LAST</i>
DATE OF BIRTH	<i>mm / dd / yyyy</i>	DISPENSING STATION LICENSE #	DIS:
MAILING ADDRESS			
CITY	STATE	ZIP	
PHONE #	E-MAIL		
By my signature, I hereby certify that the information provided on this application is true and accurate to the best of my knowledge and belief. By submitting this application, I affirm that the Office of Professional and Occupational Regulation will rely upon this information for issuance of my license and that this information is truthful and factual. I also understand that sanctions may be imposed including denial, fines, suspension or revocation of my license if this information is found to be false.			
<b>SIGNATURE</b>		<b>DATE</b>	

**IF YOU ARE CURRENTLY A MAINE LICENSED PROPANE AND NATURAL GAS TECHNICIAN WITH EITHER THE PLANT OPERATOR OR DELIVERY TECHNICIAN AUTHORITY AND WILL BE THE LIMITED OPERATOR OF THE DISPENSING STATION - COMPLETE THIS SECTION**  
*(this does **not** include individuals registered as a Limited Operator of a Dispensing Station)*

I am currently licensed as a:       Plant Operator       Delivery Technician

License Number: PNT \_\_\_\_\_

**AFFIDAVIT**

I hereby certify that \_\_\_\_\_ has  
(Name of Limited Operator)  
been properly trained as the Limited Operator in accordance with 32 MRS §18142(2)(B).

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Limited Operator

\_\_\_\_\_  
Facility Name Typed or Printed

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature & License # of Training Representative

\_\_\_\_\_  
Training Representative Name Typed or Printed

\_\_\_\_\_  
Company Name of Owner of the Filling Equipment



# PROPANE DISPENSING STATION AFFIDAVIT

I hereby certify that the following list of dispensing station operators have been properly trained by using the Dispensing Station Operators Manual and have viewed the National Propane Gas Association Video entitled, "Dispensing Propane Safely." I have also verified that each dispensing station operator is at least 18 years of age.

NAME(S) OF TRAINED DISPENSING STATION OPERATOR(S):

**PLEASE TYPE OR PRINT WITH INK.**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature of Limited Operator

\_\_\_\_\_  
Limited Operator's Name Typed or Printed

\_\_\_\_\_  
Facility Name

**TO BE POSTED AT FACILITY**