

# LPG CARD/CERTIFICATE REPLACEMENT REQUEST

This form is only for requesting duplicate licenses/certificates.

If you need to change an address/contact information, please submit a CID STATUS  
CHANGE FORM

**Fee: \$6/each**

COMPANY NAME: \_\_\_\_\_

LICENSE NUMBER: \_\_\_\_\_

QUALIFYING PARTY (QP) NAME: \_\_\_\_\_

QP CERTIFICATE NUMBER: \_\_\_\_\_

Please print

- |   |                |
|---|----------------|
| <input type="checkbox"/> Company Wallet Card      | Quantity _____ |
| <input type="checkbox"/> Company Wall Certificate | Quantity _____ |
| <input type="checkbox"/> QP Wallet Card           | Quantity _____ |

This may be submitted by email to [newmexicocustomerservice@psionline.com](mailto:newmexicocustomerservice@psionline.com)  
or to

PSI  
9550 SAN MATEO BLVD NE, STE F,  
ALBUQUERQUE, NM 87113

(Check One):  Mc  Visa  American Express  Discover

Full Card No: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Card Security Code\*: \_\_\_\_\_

*For your security, PSI requires you to enter the card identification number located on your credit card. The card identification number is located on the back of the card and consists of the last three digits\* on the signature strip. **\*If Amex, Require 4 Digit***

Billing Zip Code: \_\_\_\_\_

Cardholder Name (Print): \_\_\_\_\_ Signature: \_\_\_\_\_