



STATE OF MARYLAND

DEPARTMENT OF STATE POLICE
OFFICE OF THE STATE FIRE MARSHAL



FIRE SPRINKLER CONTRACTOR LICENSE APPLICATION

APPLICATION TYPE: NEW [] RENEWAL [] REVISION [] OTHER [] (Current License Number MSC-_____)

1. PLEASE TYPE OR PRINT (BLUE INK ONLY) CLEARLY

Form with fields for Applicant Name, Officer's Title, Business Name, Business Address, City, State, Zip Code, Mailing Address, Business Phone, Fax, Business Cellular Phone, and Business Email.

Member of National Fire Sprinkler Association Yes [] No []
Member of American Fire Sprinkler Association Yes [] No []

2. CLASS OF LICENSE APPLICATION: [Check Applicable Class(es)]

- CLASS I Inspection, testing and maintenance only; NFPA 13, 13D, & 13R Systems
CLASS II a Installation, repair, modification only; NFPA 13D & 13R Systems only
CLASS II b Layout only; NFPA 13D & 13R Systems only
CLASS II c Installation, repair, modification and layout; NFPA 13D & 13R Systems only
CLASS III a Installation, repair, modification only; NFPA 13, 13D & 13R Systems
CLASS III b Layout only; NFPA 13, 13D & 13R Systems
CLASS III c Installation, repair, modifications and layout; NFPA 13, 13D & 13R Systems

3. DESIGNATED QUALIFIED INDIVIDUAL

Form with fields for Designated Qualified Individual, Business Address, City, State, Zip Code, Business Phone, Fax, Business Cellular Phone, and Business Email.

Check respective qualification(s) to meet above class of license. Attach a copy of NICET certification and/or Professional Engineer Registration/License. If more than one individual, include this information on a separate sheet and attach to this application.

- NICET ENGINEERING TECHNICIAN LEVEL II CERTIFICATION in field of Fire Protection: Inspection and Testing of Water-Based Systems
NICET ENGINEERING TECHNICIAN LEVEL III CERTIFICATION in field of Fire Protection: Inspection and Testing of Water-Based Systems
NICET ENGINEERING TECHNICIAN LEVEL II CERTIFICATION in field of Fire Protection: Engineering Technology Water-Based (formerly Automatic Sprinkler) Systems Layout
NICET ENGINEERING TECHNICIAN LEVEL III CERTIFICATION in field of Fire Protection: Engineering Technology Water-Based (formerly Automatic Sprinkler) Systems Layout
NICET ENGINEERING TECHNICIAN LEVEL IV CERTIFICATION in field of Fire Protection: Engineering Technology Water-Based (formerly Automatic Sprinkler) Systems Layout
MARYLAND REGISTERED PROFESSIONAL ENGINEER

4. BUSINESS (SPRINKLER) YEARS OF EXPERIENCE: _____

5. NAME OF LIABILITY INSURANCE COMPANY: _____

POLICY NUMBER AND EXPIRATION: _____

Note: Attach copy of minimum \$1,000,000.00 comprehensive general liability certificate of insurance containing 30-day cancellation notification provision. The Office of the Maryland State Fire Marshal must be named as the certificate holder.

- 6. REQUIRED FEE TO BE ENCLOSED: \$300.00 – INITIAL APPLICATION
- \$200.00 – RENEWAL APPLICATION
- \$300.00 – LATE FEE
- \$ 25.00 – DUPLICATE OR REVISED LICENSE CERTIFICATE

MAKE CHECKS PAYABLE TO: MARYLAND STATE FIRE MARSHAL'S OFFICE

7. Have you, the applicant or contractor, ever been denied a sprinkler contractor's license in Maryland or in any other State or local jurisdiction or have had disciplinary action taken against such license? _____ If yes, on a separate sheet of paper, please indicate the name of the jurisdiction, date of denial or disciplinary action, and the nature and disposition of the action taken.

8. Have you, the applicant, contractor or any employee of the contractor or applicant ever been convicted of any felony or misdemeanor violation of the Maryland State Fire Code or the fire code of any other State or the District of Columbia? _____ If yes, on a separate sheet of paper, please indicate the name of the jurisdiction, date of conviction, and the nature and penalty imposed.

9. Have you, the applicant, contractor or any employee of the contractor or applicant ever been notified by the State of Maryland or any other State, local or District of Columbia jurisdiction that work has been performed by your company without receipt of required permit(s) or certification(s) from the fire authority having jurisdiction? _____ If yes, on a separate sheet of paper, please indicate the name of the jurisdiction, the nature and penalty imposed.

10. Is the business on page one listed as either "inactive" or "forfeited" with the Maryland Department of Assessments and Taxation? _____

AFFIRMATION

I, the applicant, do hereby acknowledge and affirm the following:

- a) In the event of any change of business address, notification will be made to the State Fire Marshal in writing within fourteen (14) days.
- b) In the event of termination of the Designated Qualified Individual(s), notification will be made to the State Fire Marshal in writing within five (5) days of termination.
- c) In the event of any change to the information submitted on this application, notification will be made to the State Fire Marshal in writing within fourteen (14) days from the date of change.
- d) All insurance certificates shall remain current and in force with a 30-day cancellation notification provision.
- e) All NICET certificates/Maryland Professional Engineer's License shall remain current and in force.
- f) All the laws, rules and regulations concerning this license will be abided.
- g) In the event of any change of business listing to either "inactive" or "forfeited" in accordance with the Maryland Department of Assessments and Taxation, notification will be made to the State Fire Marshal within five (5) days.

SIGNATURE OF APPLICANT: _____ DATE: _____

RETURN NOTARIZED APPLICATION AND FEES TO THE OFFICE OF THE STATE FIRE MARSHAL

State of _____

County of _____

On this _____ day of _____, 20_____, before me, the undersigned officer, personally appeared before me _____, an officer of the business, and made

(name of applicant to be printed here)

oath in due form of the law that all information on this application and all statements made to procure a license are full, complete, correct, and true to the best of his/her knowledge, information, and belief; and also made oath that he/she is the officer of the business and is duly authorized to make this affidavit.

(SEAL)

NOTARY PUBLIC SIGNATURE	
My Commission Expires:	

WARNING: ANY PERSON WHO WILLFULLY MAKES A FALSE STATEMENT ON THIS APPLICATION IS GUILTY OF A MISDEMEANOR AND ON CONVICTION IS SUBJECT TO A FINE OF NOT MORE THAN \$1,000.00 OR IMPRISONMENT NOT EXCEEDING THREE (3) YEARS, OR BOTH.

DESIGNATED QUALIFIED INDIVIDUAL AFFIRMATION

I, the Designated Qualified Individual, do hereby acknowledge and affirm the following:

- a) Accept the responsibility for performing or overseeing the work performed by other person(s) employed by the contractor in accordance with the prescribed regulations and appropriate good industry practices for the classification of license this application requests.
- b) A current NICET certificate(s) and/or Maryland Professional Engineer's License will be maintained.
- c) All the laws, rules and regulations concerning this license will be abided.
- d) If the undersigned is a Maryland Professional Engineer, by signing this affirmation, the Maryland Professional Engineer acknowledges that he/she is knowledgeable in areas of fire sprinkler systems.

SIGNATURE OF DESIGNATED QUALIFIED INDIVIDUAL	DATE

..... RETURN NOTARIZED APPLICATION AND FEES TO THE OFFICE OF THE STATE FIRE MARSHAL

State of _____

County of _____

On this _____ day of _____, 20_____, before me, the undersigned officer, personally appeared before me _____, the named Designated Qualified Individual of the

(name of Designated Qualified Individual to be printed here)

business, and made oath in due form of the law that all information on this application and all statements made to procure a license are full, complete, correct, and true to the best of his/her knowledge, information, and belief; and also made oath that he/she is the Designated Qualified Individual and is duly authorized to make this affidavit.

(SEAL)

NOTARY PUBLIC SIGNATURE	
My Commission Expires:	

..... WARNING: ANY PERSON WHO WILLFULLY MAKES A FALSE STATEMENT ON THIS APPLICATION IS GUILTY OF A MISDEMEANOR AND ON CONVICTION IS SUBJECT TO A FINE OF NOT MORE THAN \$1,000.00 OR IMPRISONMENT NOT EXCEEDING THREE (3) YEARS, OR BOTH.

SUBMIT APPLICATION AND FEE TO:
 OFFICE OF THE STATE FIRE MARSHAL
 201 Baptist Street, Suite 17
 Salisbury, Maryland 21801

FOR INFORMATION CONTACT:
 OFFICE OF THE STATE FIRE MARSHAL
 201 Baptist Street, Suite 17
 Salisbury, Maryland 21801
 410-713-3780 FAX: 410-713-3790
<http://firemarshal.state.md.us>

FOR OFFICE OF STATE FIRE MARSHAL USE ONLY

<input type="checkbox"/>	APPROVED	LICENSE NUMBER		EXPIRATION DATE	
<input type="checkbox"/>	DISAPPROVED	REMARKS			
AUTHORIZED SIGNATURE			DATE		
PAID AMOUNT		REC'D BY			

NOTE: The application will be returned unprocessed if not an original, or if blanks not are completed (*in blue ink if printed*) or if all required documentation is not included. Information provided on this application may be subject to the Freedom of Information Act.