

FPS-CL-1  
May 2001

APPLICATION FOR CONTRACTOR LICENSE  
FIRE PROTECTION CHEMICAL

( ) Initial Application

( ) Renewal Application

In compliance with KRS Chapter 198B, I hereby request that I be issued or have renewed a Fire Protection Chemical Contractors license by the Department of Housing, Buildings and Construction as required by law. I am currently engaged or intend to engage in the preparation of technical drawings, installation, repair, alteration, addition, maintenance or inspection of fire protection chemical systems.

I agree to notify the Commissioner within thirty (30) days of my change of employment of any individual named as a certificate holder for this license. I also agree that any information in this application may be verified.

APPLICATION MADE FOR: \_\_\_\_\_  
(NAME OF COMPANY)

BUSINESS ADDRESS: \_\_\_\_\_  
(Include both PO Box number and street address if applicable)

STATE: \_\_\_\_\_ (City) \_\_\_\_\_ (County or Parish)  
ZIP: \_\_\_\_\_

FEDERAL IDENTIFICATION NUMBER: \_\_\_\_\_

BUSINESS TELEPHONE NUMBER: (\_\_\_\_) \_\_\_\_\_

APPLICATION MADE BY: \_\_\_\_\_  
(NAME OF INDIVIDUAL)

CERTIFICATE OF COMPETENCY HOLDER APPLICANT(S) IS/ARE:  
(Include certificate number if individual(s) \_\_\_\_\_  
have ever or now hold Kentucky \_\_\_\_\_  
Certificate of Competency) \_\_\_\_\_

I, \_\_\_\_\_, swear or affirm that to the best of my knowledge and  
(Applicant)  
belief, the statements contained herein in this application are true and complete.

\_\_\_\_\_  
(Applicant Signature)

State of \_\_\_\_\_  
County of (Parish of) \_\_\_\_\_  
Sworn before me this \_\_\_\_\_, day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
NOTARY PUBLIC (My Commission Expires)

Include fee of \$250.00, Certificate of Insurance and application(s) for Certificate of Competency