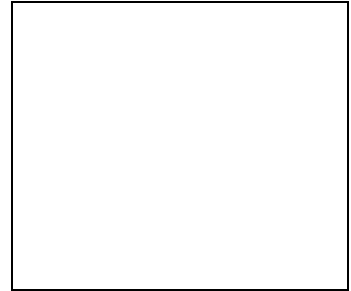




Public Protection Cabinet

Department of Housing, Buildings and Construction
Division of Fire Prevention
Fire Protection Systems
500 Mero Street, First Floor
Frankfort, Kentucky 40601-1987
Phone 502-573-0385
Fax 502-573-1004



Renewal Application for Sprinkler Systems Certification

SSR# _____

Picture

Applicant

Employer/Business

Name: _____
Address: _____
City: _____ County: _____
State: _____ Zip: _____
Phone: (____) _____
E-Mail Address: _____
Date of Birth: ____/____/____
Month Day Year

Name: _____
Street Address: _____
P.O. Box No. _____ Zip: _____
City: _____ County: _____
State: _____ Zip: _____
Phone: (____) _____
Company Federal I.D #: _____

() Send Mail to Home Address

() Send Mail to Business Address

- 1. Submit six (6) hours continued education for water-based systems; OR
2. Submit current NICET Level II or higher certification Inspection and Testing of water-based systems
3. Affidavit is to be completed on company letterhead, signed by employer and notarize
4. If not employed by active KY sprinkler contractor, submit certificate of liability insurance. Errors and omissions must be included with liability insurance and stated on Certificate of Liability Insurance. Inspector's name and address must be listed on the Certificate of Liability Insurance
5. Send a clear, passport quality color photo
6. Enclose fee in the amount of \$50.00
7. Make check or money order payable to: Kentucky State Treasurer

THIS SECTION MUST BE INITIALED:

_____ (Initial) I am not in default of any student loans backed by the KHEAA (Kentucky Higher Education Association Authority). I understand that if I am in default of any student loans backed by the KHEAA, I cannot receive a Kentucky Fire Alarm Systems or Fire Sprinkler Systems Certification at this time.

The information on this application is accurate and true to the best of my knowledge. Deceptive or misleading statements by the applicant shall be grounds for denial or shall be grounds to revoke or suspend a certification if issued.

SIGNATURE:

Date:

