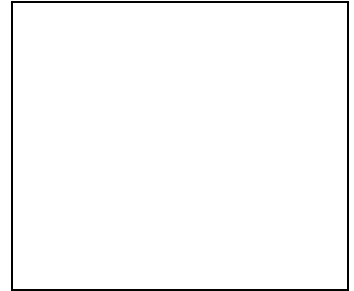




Public Protection
 Department of Housing, Buildings and Construction
 Licensing Branch
 500 Mero Street, 1st Floor
 Frankfort, Kentucky 40601-5412
 Phone 502-573-2002
 Fax 502-573-1598



Picture

Renewal Application for Sprinkler Systems
 Certification

SSR# _____

Applicant

Name: _____
 Address: _____

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

Employer/Business

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**

