



FIRE PROTECTION BUREAU – ACCREDITATION AND CERTIFICATION

PO Box 42600
Olympia WA 98504-2600
(360) 596-3945 FAX: (360) 596-3936



CERTIFIED FIRE INVESTIGATOR CURRENCY APPLICATION

PERSONAL INFORMATION
Last Name, First Name, MI, Date of Birth (MMDDYYYY)
Department Name, Phone Number, IFSAC Seal #, Issue Date
Agency Mailing Address, City, State, ZIP Code

CONTINUING EDUCATION DOCUMENTATION
To be eligible for currency, the candidate must have completed 80 hours of continuing education in current applicable NFPA standards 1033 and 921 during the five-year period prior to the certification expiration date.
Course, Date, NFPA Standard, Hours

By signing below, I certify that the above information is true and correct to the best of my knowledge.

Candidate Name (Print) Signature Date

THIS PORTION TO BE COMPLETED BY DEPARTMENT CHIEF OR EMPLOYING AUTHORITY
Currently active as a Fire Investigator? Yes No
Current background check? (Or attach copy of current commission card) Yes No
Recommended for currency? Yes No

By signing below, I certify that I have reviewed the application and all information is true and correct to the best of my knowledge.

Fire Chief/Employing Authority Name (Print) Signature Date

Submit completed application at least 30 days prior to certification expiration.
Washington State Patrol, Fire Protection Bureau, PO Box 42600, Olympia WA 98504-2600
Fax: (360) 596-3936 E-mail: ifsacquestions@wsp.wa.gov

*** Fire Protection Bureau Use Only ***
Date Received, Received By, Date Approved, Approved By

