



FIRE PROTECTION BUREAU  
LICENSING AND CERTIFICATION PROGRAMS  
PO Box 42642  
Olympia WA 98504-2642  
(360) 596-3914 FAX: (360) 596-3934



THIS PACKET IS ONLY FOR THOSE  
SEEKING TO:

**APPLY FOR CERTIFICATION AS A**  
**LEVEL 1 CERTIFICATE OF**  
**COMPETENCY HOLDER**

PER RCW 18.160 – THE FIRE SPRINKLER  
SYSTEM CONTRACTORS LAW

UNLESS YOUR EMPLOYER IS ALREADY LICENSED AS A FIRE  
PROTECTION SPRINKLER SYSTEM CONTRACTOR, THIS  
APPLICATION MUST ACCOMPANY A LICENSING APPLICATION  
OR REINSTATEMENT FORM.

**PLEASE READ ALL ASSOCIATED INSTRUCTIONS**



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Please read all of these instructions carefully. Incomplete and/or illegible documentation may delay our ability to process an application and can result in immediate denial/rejection. ANY missing information and/or refund we must process on your behalf must be completed BEFORE anything can be issued, delaying the process.

To apply for **certification as a Level 1 Certificate of Competency Holder**, you will need to:

- 1) Work for a licensed fire protection sprinkler system contractor. If currently licensed, they can be licensed as one of the normal tiers of Levels 1, 2, or 3. If you are the only certificate holder being included with a licensing application, then the company can ONLY apply for licensing as a Level 1 contractor.
- 2) Qualify for certification. In order to do this, you will need to:
  - a. Successfully pass a certification examination as administered by this office – addressed later.
  - b. Provide a copy of possessing certification through the National Institute for Certification in Engineering Technologies (NICET) of at least Level 2 in Water Based System Design.
  - c. Submit an application that includes your current Washington State Professional Engineering seal.
- 3) DO NOT SUBMIT any fees initially. Once you have passed the examination (if necessary), you will be billed using the fee submittal form you will complete as part of this application.

*With regards to the certification costs, there is an initial application fee of \$50.00 and an annual certification fee pro-rated from \$50.00. This pro-ration is based upon the month of your initial certification and does not include the cost of your employer's licensing (if necessary).*

- 4) Leave NOTHING blank in this application. Use “NOT APPLICABLE,” “DOES NOT APPLY,” or other similar mark. You are also responsible for accurately recording your employer's full (licensing) name.
- 5) Print legibly, complete electronically, or have it typed. If it cannot be read, it CAN BE REJECTED.
- 6) Return ALL portions of this document marked “MUST RETURN AS PART OF THE APPLICATION.” Unless otherwise instructed, partial or incomplete submissions – on any level – WILL be discarded.
- 7) Include a copy of a government-issued photo identification that possesses a sample of your signature.
- 8) Submit the completed application in its entirety either alone (if working for a currently licensed contractor) or as a part of a new licensing application remarked on their fee submittal form to:  
Fire Protection Bureau Licensing Programs at Post Office Box 42642 in Olympia, WA 98504-2642.
- 9) If you need testing, once your application has been received and deemed completed and legible, you will be contacted regarding the scheduling process for your certification examination. You MUST pass the certification examination in order to be certified and you WILL NOT be scheduled for the test until your application is approved. NO EXCEPTIONS.
- 10) After passing any required test, you will be given the completed fee submittal form indicating the pro-rated cost of certification. If submitted as part of a licensing application, your fees will be marked on the fee submittal form and both must be paid at the same time for either to be issued.
- 11) A completed and otherwise legal to issue application can take between two (2) and ten (10) working days to process and issue, depending on the circumstances.

**INCOMPLETE/ILLEGIBLE SUBMISSIONS WILL BE DELAYED OR SUMMARILY REJECTED**

LEVEL 1 CERTIFICATE OF COMPETENCY APPLICATION



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Those applying as a **Level 1 Certificate of Competency Holder** should be aware of the following:

- Certificate Holders are NOT a fire protection sprinkler system contractor and CANNOT bid for any work themselves. If you act as a fire protection sprinkler system contractor, you will be treated like one – including the fines for unlicensed operations.
- Certificate of Competency Holders are only allowed to work for ONE (1) licensed fire protection sprinkler system contractor at any one time and your certification is issued under that single license. In this way you are considered to be working full time as required by law. Notify us of any employment changes within thirty (30) days and before engaging in work as a Level 1 Certificate of Competency Holder for another employer.
- If your employing contractor is currently licensed, they would normally be licensed as Level 1. However, any licensed contractor, except the specialized levels (U and I&T), can employ your level of certification—just not as their only Certificate of Competency Holder, and your scope of work is still limited to the certification level of single family occupancies. This includes the dedicated underground fire service main.
- When your employer is applying for licensing with you as the only certificate applicant, they can only apply for the Level 1 Fire Protection Sprinkler System Contractors License.
- Level 1 is the first level of a tiered system. The Level 1 Certificate of Competency allows you to either personally perform or supervise any and all aspects of any and all portions of a residential fire protection sprinkler system as referenced/defined by NFPA 13 – D. You **CAN NEVER** work beyond your level of certification or outside the scope of your employing contractor’s license.
- You are responsible for any and all use of your certification stamp.
- This is an annual program based upon the calendar year. Everything issued expires December 31 of the year of issue. NO EXCEPTIONS.
- Reference the chart below for more details on work allowed by the individual certification level. PLEASE NOTE these are specific to those carrying the certification, as some functions can be supervised.

**LEVEL 1 CERTIFICATE OF COMPETENCY APPLICATION**

Levels of Certification	Single family, single story homes Purview of NFPA 13 – D					Multi-family, 4 > stories in height Purview of NFPA 13 – R					Commercial – Full Protection Purview of NFPA 13				
	Design	Installation~	Inspection and Testing	Repair and Maintenance~	Underground Fire Service Mains	Design	Installation~	Inspection and Testing	Repair and Maintenance~	Underground Fire Service Mains	Design	Installation~	Inspection and Testing	Repair and Maintenance~	Underground Fire Service Mains
Level 1	X	X	X	X	X										
Level 2	X	X	X	X	X	X	X	X	X	X					
Level 3	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Level ITT*	<i>Not Addressed By NFPA 25</i>							X					X		
Level U	<i>Not Addressed By NFPA 24</i>									X					X
Residential		X		X			X		X						
Journey		X		X			X		X			X		X	

\* Limited to inspection and testing of wet and dry pipe systems ONLY. Deluge, pumps, and chemical systems must be supervised/signed off by a Certificate of Competency Holder certified at the level of system with the component – usually Level 3.



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## INITIAL APPLICATION: LEVEL 1 CERTIFICATION

Unless otherwise instructed, this form is **ONLY** for use by a first time applicant seeking individual certification as a Level 1 Certificate of Competency Holder, limited to design and other fire protection sprinkler system work in single family residential structures as defined by, referenced by, or otherwise compliant with NFPA 13 – D, including the underground fire service main for that system.

Date of Submission: \_\_\_\_\_

<b>Applicant Full Name:</b>	_____
<b>Complete Mailing Address:</b>	_____ _____
<b>Phone Number:</b>	_____
<b>FAX Number:</b>	_____
<b>E-Mail Address:</b>	_____
<b>Last Four Digits of Social Security Number:</b>	_____ (or four unique digits of your choosing)
<b>Licensed Contractor You Work For:</b>	_____

I have performed work of a similar nature to this certification before:

Yes (complete below - **required**)       No (move to next question)

Years	Company	City/State	Position

In my past I have been arrested, charged, and/or convicted of criminal and/or civil violations:

Yes (complete below - **required**)       No (move to next question)

Year	Charge	Disposition

*RCW 18.160.080 makes felony conviction a potential hindrance to certification, with arson and fraud of particular concern. However, each application will be evaluated individually without bias.*

I already possess certification with your office and my certification number is: \_\_\_\_\_

### NATURE OF CERTIFICATION

- Currently Licensed Employer:** I am applying for certification under the current license of a Fire Protection Sprinkler System Contractor (any but Levels U or I&T).
- Employer Applying for Licensing:** I will be included in an application for a new Level 1 Fire Protection Sprinkler System Contractors license and have been remarked on their fee submittal form.

LEVEL 1 CERTIFICATE OF COMPETENCY APPLICATION



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# AFFIDAVIT OF COMPLIANCE FOR CERTIFICATION

**Name of Certification Applicant:** \_\_\_\_\_

As an applicant for certification as a Specialized Level 1 Fire Protection Sprinkler System Certificate of Competency Holder in accordance with Revised Code of Washington (RCW) 18.160 and Washington Administrative Code (WAC) 212-80, I hereby make the following statements of compliance to the Washington State Patrol Fire Protection Bureau in seeking this certification:

- 1) I have read, understand, and will abide by RCW 18.160 and its administrative rule set, WAC 212-80.
- 2) While engaged in the fire protection sprinkler system trade, I will follow all relevant state-adopted and locally enacted standards and codes to the best of my ability.
- 3) I understand and accept that the Washington State Patrol will make information regarding my certification status available to the public to assist in ensuring compliance with state law and rule.
- 4) I will only use my certification in connection to work I have either personally performed or supervised.
- 5) I will not work above the level of my certification or outside the scope of my employer's contracting license.
- 6) Any and all information herein provided to the Washington State Fire Marshal's Office and the Licensing and Certification Programs in this application and any supporting documentation are accurate and true. I have filled this application out completely, withheld nothing, and understand and accept that any incomplete and/or illegible applications can be summarily rejected.
- 7) I hereby release the Washington State Patrol Fire Protection Bureau and its employees from any liability or damage that may result from providing the information included in this application to any other regulatory or enforcement organization on the federal, state, and/or local level.

\_\_\_\_\_  
*Printed Name of the Certificate of Competency Applicant*

\_\_\_\_\_  
*Position with Company*

\_\_\_\_\_  
*Signature of Certificate of Competency Applicant*

\_\_\_\_\_  
*Date of Signature, Consent, and Application*

Subscribed and sworn before me this the \_\_\_\_\_ day of \_\_\_\_\_ of the calendar  
date full month  
 year \_\_\_\_\_ in the city and county of \_\_\_\_\_ .  
four digit year city, county

\_\_\_\_\_  
*Signature of Notary Public*

\_\_\_\_\_  
*Date Signature was Witnessed*

Printed name and contact information of the notary public

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Seal of the Notary Public

LEVEL 1 CERTIFICATE OF COMPETENCY APPLICATION



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## VERIFICATION OF EMPLOYMENT FOR A CERTIFICATE OF COMPETENCY HOLDER

<b>Name of Applicant/Employee:</b>	_____		
<b>Name of Employing Licensed Contractor:</b>	_____		
<b>Company Signatory:</b>	_____	<b>Phone Number:</b>	_____
<b>Signatory E-Mail Address:</b>	_____		
<input type="checkbox"/>	<b>Self-Verification: I, the applicant, am the only person authorized to verify employment with this company.</b>		

I, as the company signatory for the licensed fire protection sprinkler system contractor identified above, do hereby swear and attest that the listed applicant is an employee of this fire protection sprinkler system contractor and is working full time under our license alone while engaged in the fire protection sprinkler system trade regulated by [RCW 18.160](#) and [WAC 212-80](#). I further understand this statement means any and all work performed by this individual will be done under my license and remain as such until their certificate, stamp, and certification record no longer bears our name.

I verify that I am authorized by the licensed fire protection sprinkler system contracting company to make this statement on their behalf and further hereby make myself available to the Washington State Patrol Fire Protection Bureau and the Licensing and Certification Programs to answer any questions regarding this candidate for certification and/or their employment status with our company.

\_\_\_\_\_  
*Printed Name of the Licensed Fire Protection Sprinkler System Contractor's Signatory*

\_\_\_\_\_  
*Position with Company of Signatory*

\_\_\_\_\_  
*Signature of Licensed Fire Protection Sprinkler System Contractor Signatory*

\_\_\_\_\_  
*Date of Signature, Consent, and Application*

Subscribed and sworn before me this the \_\_\_\_\_ day of \_\_\_\_\_ of the calendar  
date full month  
 year \_\_\_\_\_ in the city and county of \_\_\_\_\_ .  
four digit year city, county

\_\_\_\_\_  
*Signature of Notary Public*

\_\_\_\_\_  
*Date Signature was Witnessed*

Printed name and contact information of the notary public

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Seal of the Notary Public

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## FEE SUBMITTAL: INITIAL LEVEL 1 CERTIFICATION

<b>Name of Certification Applicant:</b>	_____
<b>Employer:</b>	_____
<b>Employer Status:</b>	<input type="checkbox"/> Currently Licensed – Submitting application alone. <input type="checkbox"/> Becoming Licensed – Submitting together and I am noted on their fee submittal form.

- 1) Complete the above portion of this form and submit it as part of your application. Unless otherwise noted, **DO NOT** include any fees with your initial submission.
  - a. When submitting as part of a licensing application, be certain you are noted on their fee submittal form and have your application included in their licensing packet.
- 2) Once approved for certification, this form is returned to you with the amount due calculated by our office. This document is not valid unless signed by an employee of the Fire Protection Bureau.
  - a. If you must pass a certification examination, that must be done before this form is returned.
  - b. When a part of a licensing application, only the Licensing and Certification Fee Submittal Form is returned to the contractor with your fees noted therein.
- 3) Based upon the application's completion date and projected processing times, we try to offer two options for your initial month of certification. Each quote is for the remainder of the year, as set by month, and has a payment due date. Payments **MUST BE RECEIVED** by the chosen Quote's due date to begin certification for that month and any applications pending after the due date noted in Quote 2 will be rejected.
  - a. When combined with a licensing application, you and your employer must agree on the Quote, as the license and certification are issued together. **NO EXCEPTIONS.**
- 4) Checks and money orders are written out to the Washington State Patrol Fire Protection Bureau (WSP FPB).
- 5) A fee submittal form **MUST** be returned with your payment. Failure to do so or submitting a partial or incomplete payment will result in your payment being rejected.
  - a. When included with a licensing application, only the licensing and certification fee submittal form will be used.

LEVEL 1 CERTIFICATE OF COMPETENCY APPLICATION

<u>Quote 1 (Target)</u>		<u>Quote 2 (No Later Than)</u>	
Month of Issuance:	<input style="width: 100%;" type="text"/>	Month of Issuance:	<input style="width: 100%;" type="text"/>
Amount Due:	<input style="width: 100%;" type="text"/>	Amount Due:	<input style="width: 100%;" type="text"/>
Due Date:	<input style="width: 100%;" type="text"/>	Due Date:	<input style="width: 100%;" type="text"/>
_____		_____	
<i>Printed Name of WSP FPB Staff Member</i>		<i>Signature of WSP FPB Staff Member</i>	
		<i>Date of Signature</i>	

The following Level 1 Certification Pro-Ration Chart is ONLY provided for your information.

JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
\$50	\$44	\$40	\$36	\$32	\$28	\$24	\$20	\$16	\$12	\$8	\$4