



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 LICENSING AS A
SPECIALIZED LEVEL U FIRE
PROTECTION SPRINKLER SYSTEM
CONTRACTOR**

PER RCW 18.160 – THE FIRE SPRINKLER
SYSTEM CONTRACTORS LAW

YOU MUST INCLUDE THE APPROPRIATE COMPLETED
CERTIFICATE OF COMPETENCY HOLDER PAPERWORK FOR A
VALID SUBMISSION.

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, which WILL delay the process.

To **apply for licensing as a Specialized Level U Fire Protection Sprinkler System Contracting Company**, you will need to:

- 1) Be properly licensed with the Washington State Department of Labor and Industries (L&I) as either a General Contractor or as a Fire Protection System Specialty Contractor. This will provide you with your *Complete Business Name* and is how you will be licensed with this office and recognized within the State of Washington.
- 2) Have in your employ at least one (1) individual who either currently carries or is capable of applying for a Specialized Level U Certificate of Competency. Include a certification application, transfer, or reinstatement for each employee you are certifying under your license and mark them as such on the fee submittal form.

THIS EMPLOYEE IS CONDITIONAL FOR LICENSING AS A FIRE PROTECTION SPRINKLER SYSTEM CONTRACTING COMPANY PER [RCW 18.160.040 \(6\) \(a\)](#)

- 3) Secure and attach a third party licensing bond in the amount of \$10,000.00 with this office. This bond is separate and unique from any bonding that may already exist. In lieu of this bond, you can instead choose a deposit/savings account in the amount of \$10,000.00 in our name, but select and submit only one of these.

THIS CONTRACTOR LICENSING BOND IS CONDITIONAL FOR LICENSING AS A FIRE PROTECTION SPRINKLER SYSTEM CONTRACTING COMPANY PER [RCW 18.160.090](#)

- 4) DO NOT SUBMIT any fees initially. Once your application has been deemed completed, valid, and legal to issue, you will be billed using the fee submittal form completed at the end of this application.

There is an initial application fee of \$100.00 and an annual licensing fee pro-rated from \$1,500.00. This pro-ration is based upon the month of your initial licensing, and that cost does not include certifying your employee(s), which is dependent upon the nature of their certification (application, transfer, or reinstatement).

- 5) Leave NOTHING in this application blank. Use “NOT APPLICABLE,” “DOES NOT APPLY,” or other clarifying statements.
- 6) Print legibly, complete electronically, or have it typed. If it cannot be read, it CAN BE REJECTED.
- 7) 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.
- 8) Submit the completed application in its entirety along with your certificate holder paperwork to: Fire Protection Bureau Licensing Programs at Post Office Box 42642 in Olympia, WA 98504-2642.
- 9) In the event that your Certificate of Competency Holder must first pass the certification examination, the issuance of your licensing, their certification, and the exact pro-rated fees will be completely contingent upon the completion of that process.
- 10) 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

SPECIALIZED LEVEL U CONTRACTOR LICENSING APPLICATION



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It is a violation of state law to bid for or offer to execute a contract for any aspect of work on a fire protection sprinkler system without first being properly licensed with this office.

Things to be aware of as a **SPECIALIZED LEVEL U FIRE PROTECTION SPRINKLER SYSTEM CONTRACTOR**:

- Fire Protection Sprinkler System Contractors are not issued a certification stamp. Only the Specialized Level U Certificate of Competency Holder(s) you employ are approved to secure a certification stamp.
- Your licensing is contingent upon employing at least one (1) Specialized Level U Certificate of Competency Holder at all times. This is the only level of certification that can be issued under your specialized contracting license.
- Should a specialized Level U Fire Protection Sprinkler System Contractor lose all of their Specialized Level U Certificate of Competency Holders, they have six months or until the next renewal cycle to replace them – whichever comes last. HOWEVER, due to the specialized nature of the licensure, it is considered invalid and effectively revoked, as you would then no longer employ anyone capable of performing the work and only the Specialized Level U Certificate of Competency Holder, who cannot stamp work they were not somehow involved in, carries the seal as required by law.

— If this happens, NOTIFY OUR OFFICE IMMEDIATELY.

- Your company is fully liable and responsible for anything your employees do. Any action they perform is done under your license, and any fines or penalties assessed for their actions will be the contractor's responsibility.
- Levels 1, 2, and 3 are all encompassing progressive tiers of operation. The Level U fire protection sprinkler system contractor is a specialized level of licensing operating outside this system. Neither you nor your employees can be involved in any work outside the Level U specialized licensing scope, which is the physical installation of the dedicated underground fire service main from the source to the base of the riser – never design of any kind at any level.
- Your licensing scope is the entire dedicated underground fire service main that starts at the valve closest to any approved water source, where water first becomes non-flowing, which if shut off shuts off only the fire protection sprinkler system. All contracted sprinkler system work is under the purview of RCW 18.160.
- This is an annual program based upon the calendar year. Everything issued expires December 31 of the year of issue. NO EXCEPTIONS.
- Please reference the chart below for more details on work allowed by the individual licensing levels.

State Licensing Levels	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 I&T*	Not Addressed By NFPA 25							X					X		
Level U	Not Addressed By NFPA 24									X					X

* Limited to inspection and testing of wet and dry pipe systems ONLY. Deluge, pumps, and chemical systems are restricted to the all encompassing licensing levels dependent upon the standard of the system – usually Level 3.

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INITIAL APPLICATION: SPECIALIZED LEVEL U LICENSING

Unless otherwise instructed, this form is **ONLY** for use by a first-time applicant seeking specialized licensing to perform the installation and/or repair of dedicated underground fire service mains and their appurtenances as prescribed by NFPA 24.

Date of this application: _____

I/We are properly licensed as a contractor with the Department of Labor and Industries as a:

General Contractor

Fire Protection Specialty Contractor

Washington State UBI (Unified Business Identifier) Number: _____

Washington State (Specialty) Contractor Number: _____ (Issued by L&I)

Complete Business Name: _____

Complete Mailing Address: _____

Contact Name: _____ **Position:** _____

Phone Number: _____ **FAX Number:** _____

E-Mail Address: _____

You have at least ONE (1) full time employee who is:

CURRENTLY certified as a Certificate of Competency Holder to another contractor.*

Name	Currently Noted Employer	Certification Number	Level

Applying for or qualified to become a Specialized Level U Certificate of Competency Holder.**

Name	Applying or Reinstating	Needs to Test	Previous Certification

* **MUST** include the properly completed transfer paperwork from each employee.

** **REQUIRES** a properly completed application or reinstatement from each employee and may require an examination, which could delay your licensing application.

LEAVE NO ENTRY BLANK. BLANK, INCOMPLETE, AND/OR ILLEGIBLE APPLICATIONS WILL BE SUMMARILY REJECTED.

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CONTRACTOR LICENSING BACKGROUND

I/We are legally registered as a:

- Sole Proprietorship Partnership Corporation LLC LLP

Principle Partners, Officers, and/or Managing Employees

Name	Position With Company	Years With Company	Phone Number

Other Licenses Associated With This Company

Contractor Number	Company Name	Name of Owner/President	Licensing Status

How many years has this company operated in its current structure? _____

How many of those years have been spent performing work of this type? _____

Is there another company who owns this one – a parent company? Yes No

Parent Company Name: _____
Contractor Number: _____ UBI Number: _____

Any Principle Partners, Officers, and/or Managing Employees Charged or Convicted of any Criminal Violations?

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

Name	Position With Company	Charge	Disposition

[RCW 18.160.080](#) makes felony conviction a potential hindrance to licensing, with arson and fraud our primary concern. However, we accept and review any and all applications with such notations openly and free from bias, seeking only statutory compliance and public fire and life safety.

LEAVE NO ENTRY BLANK. BLANK, INCOMPLETE, AND/OR ILLEGIBLE APPLICATIONS WILL BE SUMMARILY REJECTED.

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AFFIDAVIT OF COMPLIANCE FOR SPECIALIZED LICENSING

Name of Contractor: _____

I, as the signatory of an applicant for licensing as a specialized Level U Fire Protection Sprinkler System Contractor in accordance with Revised Code of Washington (RCW) [18.160](#) and Washington Administrative Code (WAC) [212-80](#), do hereby make the following statements of compliance to the Washington State Patrol Fire Protection Bureau:

- 1) We have read, understand, and will abide by RCW 18.160 and its administrative rule set, WAC 212-80.
- 2) While engaged in business as a fire sprinkler system contractor, we will follow all relevant state-adopted and locally enacted standards and codes to the best of our ability and employ people properly qualified and/or certified to engage in the sprinkler trade safely, competently, and legally.
- 3) We understand and accept that the Washington State Patrol will make information regarding our licensing status and the status of our certified employees available to the public to assist in ensuring compliance with state law and rule.
- 4) We understand the nature of this Specialized Level U Contractor's License we apply for and, as such, agree that our employees will not work above this specialty while engaged in the fire protection sprinkler system trade.
- 5) 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. We have filled this application out completely, withheld nothing, and understand and accept that any incomplete and/or illegible applications can be summarily rejected.
- 6) We 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.

SPECIALIZED LEVEL U CONTRACTOR LICENSING APPLICATION

Printed Name of Fire Sprinkler System Contractor Signatory

Position with Company

Signature of Fire 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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SPECIALIZED LEVEL U FIRE SPRINKLER SYSTEM CONTRACTOR'S BOND

This bond is required by Revised Code of Washington (RCW) 18.160.090 for licensing as a Fire Protection Sprinkler System Contractor and must be submitted to the Fire Protection Bureau within 30 days of its effective date to remain valid.

Contractor Name:	_____		
Doing Business As:	_____		
Surety Company:	_____		
Legal Surety From the State of:	_____	Bond Number:	_____
<i>Surety Company MUST be authorized to transact surety business within the State of Washington to enact this bond</i>			

By this bond the Contractor and Surety bind ourselves and our heirs, executors, administrators, successors, and assigns, jointly and severely, to pay the State of Washington the penal sum of **TEN THOUSAND DOLLARS (\$10,000.00)** lawful money of the United States of America.

The Contractor has applied for a Fire Sprinkler System Contractor's license from the Fire Protection Bureau of the Washington State Patrol. The Contractor is required by RCW 18.160 to furnish a continuous licensing bond in the penal sum of **TEN THOUSAND DOLLARS (\$10,000.00)** with good and sufficient surety. The bond must be conditioned as required by RCW 18.160.

The above obligation is conditioned that the Contractor will pay to all who have purchased through contract fire protection sprinkler system design, installation, inspection, testing, maintenance and/or repair work and have obtained a judgment against the Contractor for any breach of said contract. Upon doing so, the obligations of the Contractor and Surety under this bond shall thereafter become null and void. Otherwise, this obligation shall remain in full force and effect per the conditions and terms of RCW 18.160 regarding any and all fire protection sprinkler system work performed by the Contractor.

Any purchaser of a fire protection sprinkler system that has a claim against the Contractor for breach of a fire protection sprinkler system contract may bring suit against this bond in the superior court of the county in which the work was done or of any county in which the court has jurisdiction over the Contractor. No person other than a party to such a breached contract has any right against this bond. Said suit **MUST** be brought forward within one year of the expiration of the Contractor's license with the Fire Protection Bureau. This bond shall not be a substitute for or supplemental to any liability or any other insurance obligation made by law or contract and in **NO CASE** shall the Surety be held liable for any claim in excess of this bond.

This bond shall become effective on _____ and **shall remain in full force** until the earlier of (a) one year after the final expiration of the fire sprinkler system contractor license with the Washington State Patrol Fire Protection Bureau or (b) 45 days after the Surety gives notice of its intent to cancel the bond to the Contractor and to the Director of the Fire Protection Bureau. The aggregate liability of the Surety of all claims, regardless of the year in which the claim accrued, shall not exceed the penal sum of **TEN THOUSAND DOLLARS (\$10,000.00)** regardless of the number of years this bond is in effect, or whether it is reinstated, renewed, reissued, or otherwise continued in any way, shape, and/or form.

Cancelling this bond **shall not** be considered a method of avoiding a valid judgment to any party with legal claim to this coverage.

IN WITNESS OF THIS CONTRACT, the Contractor and Surety have affixed their hands and seals to this binding obligation.	
_____ Contractor's Name and Signature	_____ Surety's Name and Signature
_____ Date of Signature	_____ Date of Signature

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ASSIGNED SAVINGS ACCOUNT (WASHINGTON STATE BANKS ONLY)

This savings account is created for the sole purpose of fulfilling the bonding requirements of Revised Code of Washington (RCW) 18.160.090 for licensing as a Fire Protection Sprinkler System Contractor.

The undersigned depositor hereby assigns and transfers any and all titles and rights to the savings account created herein unto the Washington State Patrol, Fire Protection Bureau. This deposit shall be held in perpetuity by the bank referenced below who grants full power of control unto the Director of Fire Protection, also known as the Washington State Fire Marshal.

The Washington State Fire Marshal shall possess sole authority to demand, collect, and/or receive monies from this account, in whole or in part, at all times. Releasing monies from this account shall be accomplished within thirty (30) days of receiving a written notice from the Washington State Fire Marshal. There shall be no other conditions of release and no other authority can cause release of any funds contained within this savings account.

ASSIGNED SAVINGS ACCOUNT INFORMATION

Name of Bank: _____

Bank Address: _____
(complete)

Name of Business/Fire Sprinkler Contractor: _____

Depositor: _____ **Account Number:** _____

Amount Deposited Into Account: _____ *CANNOT BE LESS than \$10,000.00*

Signature of Depositor: _____ **Date of Deposit:** _____

The undersigned hereby accepts the above-referenced deposit on behalf of the Washington State Fire Marshal's Office and agrees to hold these funds until instructed otherwise by the State Fire Marshal.

Name of Bank Officer: _____ **Title of Officer:** _____

Signature of Officer: _____ **Date of Signature:** _____

NOTARIZATION OF BANK OFFICER

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

Signature of Notary Public for the Washington State Bank

Date of Notary Action

Printed name and contact information of the notary public

Seal of the Notary Public

THIS DEPOSIT MUST REMAIN IN PLACE FOR NOT LESS THAN ONE (1) LICENSING YEAR AFTER THE FINAL EXPIRATION OF THE LICENSE WITH THIS OFFICE

MUST RETURN THIS OR BOND AS PART OF THE APPLICATION



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FEE SUBMITTAL: INITIAL LICENSING AND CERTIFICATION

Name of Contractor:	_____
Number of Initial Certificate of Competency Applications:	_____ (annual fees vary)
Name(s) of Included Application(s):	_____ _____
Number of Certificate of Competency Transfers:	_____ (annual fees not pro-rated)
Name(s) of Included Transfer(s):	_____ _____
Number of Certificate of Competency Reinstatements:	_____ (annual fees not pro-rated)
Name(s) of Included Reinstatement(s):	_____ _____

- 1) Complete the above portion of this form and submit it with all the application paperwork for your company and certificate holder(s). Unless otherwise instructed, DO NOT include any fees with your initial submission.
- 2) Once the applications are approved and any required examinations are passed, 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.
- 3) Based upon the application's completion date and projected processing time, we try to offer two options for your initial month of licensing. Each quote is for the remainder of the year, as set by month, includes the fees for your employees noted above, and has a due date. Payments **MUST BE RECEIVED** by your chosen quote's due date to begin licensing for that month, and applications pending after the date noted in Quote 2 will be rejected.
- 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.

SPECIALIZED LEVEL U CONTRACTOR LICENSING APPLICATION

<u>Quote 1 (Target)</u>		<u>Quote 2 (No Later Than)</u>	
Month:	<input style="width:90%;" type="text"/>	Month:	<input style="width:90%;" type="text"/>
Licensing Fees:	<input style="width:90%;" type="text"/>	Licensing Fees:	<input style="width:90%;" type="text"/>
Certification Fees:	<input style="width:90%;" type="text"/>	Certification Fees:	<input style="width:90%;" type="text"/>
Amount Due:	<input style="width:90%;" type="text"/>	Amount Due:	<input style="width:90%;" type="text"/>
Due Date:	<input style="width:90%;" type="text"/>	Due Date:	<input style="width:90%;" 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 U Licensing Pro-Ration Chart is ONLY provided for your information.

JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
\$1,500	\$1,375	\$1,250	\$1,125	\$1,000	\$875	\$750	\$625	\$500	\$375	\$250	\$125