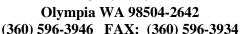
# LEVEL 1 CONTRACTOR LICENSING APPLICATION

# FIRE PROTECTION BUREAU LICENSING AND CERTIFICATION PROGRAMS

PO Box 42642





(360) 596-3946 FAX: (360) 596-393 E-Mail: firesprinkler@wsp.wa.gov

Please read instructions carefully. Incomplete or missing information may delay processing and/or result in rejection.

To apply for licensing as a Level 1 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 as a contracting company.
- 2) Have in your employ at least one individual who either currently carries or is capable of applying for a Level 1 Certificate of Competency. Include a certification application, transfer, or reinstatement for each employee you are certifying with your licensing application and mark them as such on the fee submittal form. This employee is conditional for licensing as a fire protection sprinkler system contracting company.
- 3) Secure and attach a third party licensing bond in the amount of \$6,000.00 with this office. This bond is separate and unique from any bonding that may already exist.
  - a. In lieu of this bond, you may choose a deposit/savings account in the amount of \$6,000.00 in our name. The bond is conditional for licensing as a fire protection sprinkler system contracting company.
- 4) DO NOT SUBMIT any fees with this application. You will be billed once the application has been approved.

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

- 5) Please complete all sections of this application. Use "NOT APPLICABLE," "DOES NOT APPLY," "NO CHANGE," or other similar marks as appropriate. Please print legibly or complete electronically.
- 6) Return all portions of this document marked "MUST RETURN."
- 7) Submit the <u>completed</u> application and any required documentation on your certified employee(s) as noted on your licensing fee submittal form to the **Fire Protection Bureau**, **Licensing and Certification Programs** through one (1) of the following methods:

- 8) If your required Certificate of Competency Holder(s) must first pass the certification examination, the issuance of your licensing, their certification, and the exact pro-rated fees are contingent upon the completion of that process.
- 9) Applications take approximately 15 days to process and issue.

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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.

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### Things to be aware of as a LEVEL 1 FIRE PROTECTION SPRINKLER SYSTEM CONTRACTOR:

- Fire Protection Sprinkler System Contractors are not issued a certification stamp. Only the Level 1 Certificate of Competency Holder(s) you employ are approved to secure a certification stamp.
- Level 1 licensing is contingent upon employing at least one (1) Level 1 Certificate of Competency Holder at all times.
- Should a Level 1 Fire Protection Sprinkler System Contractor lose their only Level 1 Certificate of Competency Holder, the contractor has six months or the next renewal cycle to get a replacement whichever comes last. The contractor must notify us of the loss of their certificate holder within thirty (30) days. Only the Certificate of Competency Holder, who cannot stamp work they were not somehow involved in, carries the seal as required by law.
  - If this happens, the sprinkler contractor is allowed to finish any active phase of work provided the properly licensed/certified staff necessary to perform the work, such as plumbers and fitters, are still in the contractor's employ.
- Any actions performed by employees under the contractor's license and any fines or penalties assessed for their actions are the contractor's responsibility.
- Levels 1, 2, and 3 are progressive tiers of licensure. A Level 1 contractor is the base level of the tier structure. You cannot bid for, nor can your staff be involved in, any work outside the Level 1 licensing scope.
- The Level 1 licensing scope is the entire sprinkler system, including the 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. (Refer to NFPA 13D for more information.) All contracted sprinkler 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.
- Please reference the chart below for more details on work allowed by the individual 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				tion	
State Licensing Levels	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	No	ot Addre	essed By	NFPA 2	24					X					X

<sup>\*</sup> Limited to inspection and testing of wet and dry pipe systems ONLY. Deluge, pumps, and chemical systems are restricted to the allencompassing licensing levels dependent upon the standard of the system – usually Level 3.

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# INITIAL APPLICATION: LEVEL 1 CONTRACTOR LICENSING

This form is for first-time applicants for a Level 1 Fire Protection Sprinkler System Contractor's License only. Please print clearly. It is the responsibility of the applicant to submit all supporting documentation. Failure to do so may delay processing.

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 l	Business Identifier) Nur	nber:							
Washington State (Specialty) Co	ntractor Number:			(Issued by	L&I)				
<b>Complete Business Name:</b>									
Mailing Address:  Street Address	s or PO Box								
City Contact Name:		Position:	State	z ZIP Code					
Phone Number:  E-Mail Address:	FAX Numb	er:							
D-Man Address.									
You have at least ONE (1) full time	e employee who is:								
Currently certified as a Certi	ficate of Competency Ho	lder to another co	ontractor.*						
Name	Currently Noted E	mployer	Certificati	ion Number	Level				
Applying for or otherwise qua	lified to become a Level	1 Certificate of C	Competency	Holder.**					
Name	Applying or Reins	tating Need	ds to Test	Previous Co	ertification				

- **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.





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Date Received	

### CONTRACTOR LICENSING BACKGROUND

1/ we are legally reg	istereu as a:				
Sole Pro	oprietorship	Partnership	Corporation	on LLC	LLP
	Principle Pa	rtners, Officers	, and/or Managi	ing Employees	
Namo	e	Position wi	Phone Number		
	Other	Licenses Associ	ated with this C	ompany	_
Contractor Number	Cor	npany Name	Name	e of Owner/Preside	ent Licensing Status
How many years has	this company op	erated in its curr	ent structure?		
How many of those y	years have been s	pent performing	work of this type	2?	_
Is there another comp	pany who owns tl	his one – a paren	t company?	Yes No	
<b>D</b> 4 G	NT.				
Parent Comp					
<b>Contractor N</b>	Number:		<b>UBI Numb</b>	er:	
Any Principle Partner	· ·	<b>_</b>	•		Criminal Violations?
Yes (complete be	elow - <u>required</u> )		nove to next que		
Name		<b>Position With</b>	Company	Charge	Disposition

<u>RCW 18.160.080</u> makes felony conviction a potential obstacle 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.



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# AFFIDAVIT OF COMPLIANCE FOR LEVEL 1 LICENSING

Na	ame of Contractor:			
Revised	e signatory of an applicant for licensing as a Level 1 Code of Washington (RCW) 18.160 and Washing and statements of compliance to the Washington Sta	ton Administrative Co	ode (WAC) <u>212-80</u> , do hereby make	e the
1)	We have read, understand, and will abide by RCW	V 18.160 and its admin	istrative rule set, WAC 212-80.	
2)	While engaged in business as a fire sprinkler syste enacted standards and codes to the best of our abil the sprinkler trade safely, competently, and legally	ity and employ people		
3)	We understand and accept that the Washington Stathe status of our certified employees available to the			
4)	We understand the nature of this Level 1 Contract will work above this level while engaged in the firm			r employees
5)	Any and all information herein provided to the Wa Certification Programs in this application and any application out completely, withheld nothing, and applications can be summarily rejected.	supporting documenta	ation are accurate and true. We have	ve filled this
6)	We hereby release the Washington State Patrol Fir that may result from providing the information incorganization on the federal, state, and/or local level	cluded in this application		
-	Printed Name of Fire Sprinkler System Contractor S	ignatory	Position with Company	
•	Signature of Fire Sprinkler System Contractor Sign	natory	Date of Signature	
Sub	scribed and sworn before me this the	day of	of the ca	lendar
	aai	ie	full month	
year	four digit year in the city and county of	<u> </u>	city, county •	
	jour dign yeur		cuy, county	
	Signature of Notary Public		Date Signature was Witnes	esed
	5	Printed name and	contact information of the nota	

Seal of the Notary Public



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### LEVEL 1 FIRE SPRINKLER SYSTEM CONTRACTOR'S BOND

This bond is required by 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:
Surety Company MUST be authorized to transact surety business within the State of Washington to enact this bond
By this bond the Contractor and Surety bind ourselves and our heirs, executors, administrators, successors, and assigns, jointly and everely, to pay the State of Washington the penal sum of <b>SIX THOUSAND DOLLARS</b> (\$6,000.00) lawful money of the United tates 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 <b>SIX THOUSAND POLLARS</b> (\$6,000.00) 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 ystem design, installation, inspection, testing, maintenance and/or repair work and have obtained a judgment against the Contractor or any breach of said contract. Upon doing so, the obligations of the Contractor and Surety under this bond shall thereafter become ull and void. Otherwise, this obligation shall remain in full force and effect per the conditions and terms of RCW 18.160 regarding ny 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 his 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 ontract 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 ear after the final expiration of the fire sprinkler system contractor license with the Washington State Patrol Fire Protection Bureau of 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 enal sum of SIX THOUSAND DOLLARS (\$6,000.00) regardless of the number of years this bond is in effect, or whether it is einstated, 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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WASHINGTON STATE PATROL

# 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 AC	CCOUNT INFORMATION
Name of Bank:	
Bank Address:	
(complete)	
Name of Business/Fire Sprinkler Contractor:	
Depositor:	Account Number:
<b>Amount Deposited Into Account:</b>	CANNOT BE LESS than \$6,000.00
Signature of Depositor:	<b>Date of Deposit:</b>
	osit on behalf of the Washington State Fire Marshal's Office ucted otherwise by the State Fire Marshal.
Name of Bank Officer:	Title of Officer:
Signature of Officer:	Date of Signature:
NOTARIZATION ( Subscribed and sworn before me this the	Date of Signature:  OF BANK OFFICER  day of of the calendar
NOTARIZATION (	Date of Signature:  OF BANK OFFICER
Subscribed and sworn before me this the	Date of Signature:  OF BANK OFFICER  day of of the calendar
Subscribed and sworn before me this the  year in the city and county of  four digit year in the city and county of	Date of Signature:  OF BANK OFFICER  day of of the calendar  full month  city, county
Subscribed and sworn before me this the  year in the city and county of	Date of Signature:  OF BANK OFFICER  day of of the calendar  full month  city, county  Date of Notary Action
Subscribed and sworn before me this the  year in the city and county of  four digit year in the city and county of	Date of Signature:  OF BANK OFFICER  day of of the calendar  full month  city, county
Subscribed and sworn before me this the  year in the city and county of  four digit year in the city and county of	Date of Signature:  OF BANK OFFICER  day of of the calendar  full month  city, county  Date of Notary Action
Subscribed and sworn before me this the  year in the city and county of  four digit year in the city and county of	Date of Signature:  OF BANK OFFICER  day of of the calendar  full month  city, county  Date of Notary Action

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

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Date Received

# FEE SUBMITTAL: INITIAL LICENSING AND CERTIFICATION

Certificate of Competency Holder (Employee) Details:									
<b>Transfer Applications</b>	Reinstatement Applications								
Number Included: (Fees Paid)	Number Included: (Fees Not Pro-Rated)								
Name of Employee(s) to Transfer	Name of Person(s) to Reinstate								
	Transfer Applications  Number Included:  (Fees Paid)								

- 1) Complete the top of this form and submit it with the application for your company and each certificate holder. 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 this office.
- Based upon the application's completion date and projected processing times, 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).
- A fee submittal form <u>MUST</u> be returned with your payment. Failure to do so or submitting a partial or incomplete payment will result in your payment being rejected.

FOR WSP USE ONLY								
Quote 1	(Target)	Quote 2 (No Later Than)						
Month:		Month:						
<b>Licensing Fees:</b>		Licensing Fees:						
Certification Fees:		# of COC's Certification Fees:						
<b>Amount Due:</b>		Amount Due:						
<b>Due Date:</b>		Due Date:						
Printed Name of WSP FI	PB Staff Member	Signature of WSP FPB Staff Member	Date of Signature					

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

JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
\$100	\$92	\$83	\$75	\$67	\$58	\$50	\$42	\$33	\$25	\$17	\$8

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