

FIRE PROTECTION BUREAU EDUCATION, ENFORCEMENT, AND ANALYTICS SECTION PO BOX 42642 OLYMPIA, WA 98504-2642



(360) 596-3946 - firesprinkler@wsp.wa.gov

SPRINKLER FITTER TRAINEE APPLICATION

Read ALL instructions below carefully. Incomplete, illegible, or missing information may delay processing and/or result in rejection. To apply for certification as a **Trainee Level Fitter** with the state of Washington you will need to:

- 1) Work for a fire protection sprinkler system contracting company currently licensed per Revised Code of Washington (RCW) 18.160.
- 2) Work only under the supervision of a sprinkler fitter properly certified per RCW 18.270 when working in the fire sprinkler fitter trade. For residential sprinkler fitter work, this could be either a Residential or Journey Level Fitter. For commercial sprinkler fitter work, this can only be a Journey Level Fitter. Union or other industry affiliations and licensing as a plumber cannot act in lieu of any supervisory or employment requirements prescribed by RCW 18.270.
- 3) You MUST include a copy of a valid government-issued photo identification that possesses a representative sample of your signature.
- 4) You must include the non-refundable \$ 100.00 application fee with this properly completed form through a check or money order made payable to the Washington State Patrol Fire Protection Bureau (WSP FPB). Any application missing this fee will not be processed.
- 5) Complete all sections of this application. Write "NOT APPLICABLE", "DOES NOT APPLY", or other clarifying statements to demonstrate your response.
- 6) Accurately record your employing contractor's full licensing name, which must exactly match your included Verification of Employment Form. Your certification <u>will not</u> be issued if this information is unclear or indicates anyone other than a Fire Protection Sprinkler System Contractor currently licensed per RCW 18.160.
- 7) Return all portions of this completed application marked "MUST RETURN AS PART OF THE APPLICATION" at the bottom right of the page and the application fee to:

Washington State Patrol Fire Protection Bureau Education, Enforcement, and Analytics Section Post Office Box 42642 Olympia, WA 98504-2642

8) Within two (2) to ten (10) working days of your application's review, acceptance, and approval your certification will be issued and mailed out by USPS to the address provided in this application process.

3000-420-093 (R 1/23) DO NOT RETURN



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INITIAL APPLICATION: SPRINKLER FITTER TRAINEE

This form is only for use by individuals who wish to engage in the fire sprinkler fitting trade who do not otherwise qualify as a Residential or Journey Level Fitter per RCW 18.270.

Date of submission:		
Applicant Full Name:		
Mailing Address:		
Street Address or PO	O Box	
City		State ZIP Code
Phone Number:	FAX Number:	
E-Mail Address:		
Last Four Digits of Social Security Nu	mber: (or four t	unique digits of your choosing)
Company You Work For:		
List any Previously Issued Certification	ns From our Office:	
(N/A if Not Applicable)		
Tr	ade Organization Affiliation(s)	
Name and State of Organization	Position With Organization	Time Frame In Calendar Years
Compliance as a Fitter Trainee		
As an applicant for certification as a Fire Sprinkler Washington State Patrol Fire Protection Bureau (W		g statements of compliance to the
1) I have read, understand, and will abide by	RCW 18.270 and its administrative rule se	et, <u>WAC 212-90</u> .
2) I will follow all relevant state-adopted and	d locally enacted standards and codes to the	e best of my ability.
	B will make information regarding my cert aw and rule and release them from any liab	
 I will only use my certification in connect sprinkler fitter, and only for a fire protecti 	ion to work I have personally performed, on sprinkler system contractor licensed pro	
5) I will not perform any work in the fire spr	inkler trade above the level of my supervis	sing fitter at any time.
6) All information provided as a part of this	application process and any supporting doc	cumentation are accurate and true.
Printed Name of Fitter Trained	e Applicant	
Signature of Fitter Trainee A	Applicant	Date of Signature



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Signature of Licensed Fire Protection Sprinkler System Contractor Signatory



VERIFICATION OF EMPLOYMENT FOR A FITTER TRAINEE

Name of Applicant/Employee:		
Name of Employing Licensed Contractor:		
Company Signatory Name: Phone Number:		
Signatory E-Mail Address:		
Employment Start Date:		
SELF-VERIFICATION: Check box ONLY if the Applicant/Employee and Company Signatory are the same person AND no one else can verify employment with this company.		
I, the company signatory for the employing licensed contractor as identified above, do hereby swear and attest the following:		
1) This applicant is currently an employee of the above fire protection sprinkler system contracting company and I have accurately provided their starting date with this company.		
2) This company is a currently licensed fire protection sprinkler system contractor as referenced in RCW 18.270 and defined by RCW 18.160, legal to perform fire protection sprinkler system contracting work, which includes sprinkler system installation and repair, within the state of Washington.		
3) While engaged in the fire sprinkler fitting trade for this company, this applicant for Trainee Level Fitter Certification will not be allowed to work unsupervised until such time as they are properly certified as a Residential or Journey Level fitter per RCW 18.270.		
4) The above listed fire protection sprinkler system contractor employs Residential and Journey Level Fire Sprinkler Fitters in sufficient number to ensure this trainee will be properly supervised at all times they are engaged in the fire sprinkler fitting trade.		
With my signature below, I verify the above information is correct and true to the best of my ability and that I am authorized by the licensed fire protection sprinkler system contractor to make these statements and commitments regarding this individual's employment.		
I will be available to the Washington State Patrol Fire Protection Bureau to answer any questions regarding this applicant and their employment status with our company.		
Printed Name of the Licensed Fire Protection Sprinkler System Contractor's Signatory Position of Signatory with the Company		

Date of Signature, Consent, and Application



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FEE SUBMITTAL: INITIAL TRAINEE LEVEL FITTER

APPLICANT DETAILS:	
Name of Certification Applicant:	
Employing Contractor:	

INSTRUCTIONS:

- 1) Complete the above portion of this form and submit it with your completed application.
 - a. A completed application includes ALL forms marked "MUST RETURN AS PART OF THE APPLICATION".
 - b. Remember to include the government issued photo ID.
 - c. Unless otherwise instructed, partial or incomplete submissions on any level WILL NOT be accepted and may be discarded.
- 2) Include with this form the non-refundable \$ 100.00 Trainee Fitter Application Fee.
 - a. Payment must be submitted physically by check or money order.
 - b. Checks and Money Orders are to be written out to the Washington State Patrol Fire Protection Bureau (WSP FPB).
 - c. Unless otherwise instructed, this application WILL NOT be accepted and may be discarded if the payment is partial, incomplete, or missing.
- 3) Mail to:

Washington State Patrol Fire Protection Bureau Education, Enforcement, and Analytics Section Post Office Box 42642 Olympia, WA 98504-2642