

IOWA STATE FIRE MARSHAL DIVISION

Attn: Licensing Administrator

215 E Seventh Street; Des Moines, IA 50319

Email: fmlicensinginfo@dps.state.ia.us



APPLICATION CHECKLISTS

(EFFECTIVE IMMEDIATELY)

1. DO NOT mail an incomplete application packet or it will be returned to you.

2. Questions left blank on any forms will delay processing of your application.

3. Military Veterans-include a copy of your DD214 and/or training records

FIRE PROTECTION SYSTEM CONTRACTOR CERTIFICATION APPLICATION

- Fire Protection System Contractor Certification Application
- Certificate of Liability Insurance
- Copy of qualifying certification(s) for each endorsement selected

****You must recertify your certification prior to, or upon, expiration before you can renew your license.**

- Check made out to *Iowa Department of Public Safety* for the total fee
- Division of Labor Contractor Registration Number or proof of exemption
 - If you do not have one, please visit <http://www.iowaworkforce.org/labor/contractor.htm> and apply.

FIRE PROTECTION SYSTEM INSTALLER LICENSING APPLICATION

- Fire Protection System Installer Licensing Application
- Copy of your employer's Certificate of Liability Insurance
- Copy of qualifying certification(s) for each endorsement selected

****You must recertify your certification prior to, or upon, expiration before you can renew your license.**

- Check made out to *Iowa Department of Public Safety* for the total fee

ALARM SYSTEM CONTRACTOR CERTIFICATION APPLICATION

- Alarm System Contractor Certification Application
- Certificate of Liability Insurance
- Copy of qualifying certification(s) for each endorsement selected

****You must recertify your certification prior to, or upon, expiration before you can renew your license.**

- Check made out to *Iowa Department of Public Safety* for the total fee, including criminal history
- One (1) Fingerprint card (FBI form FD-258) inked or Live Scan in black ink
- Completed and signed Waiver form
- Division of Labor Contractor Registration Number or proof of exemption
 - If you do not have one, please visit <http://www.iowaworkforce.org/labor/contractor.htm> and apply.

ALARM SYSTEM INSTALLER CERTIFICATION APPLICATION

- Alarm System Contractor Certification Application
- Copy of your employer's Certificate of Liability Insurance
- Copy of qualifying certification(s) for each endorsement selected

****You must recertify your certification prior to, or upon, expiration before you can renew your license.**

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FIRE PROTECTION SYSTEM INSTALLER LICENSING APPLICATION

New License Employer Property Only Renew License (License#: _____) Amend License (License#: _____)

APPLICANT INFORMATION: (please print clearly)

Applicant Name: _____ Phone Number: _____

Mailing Address: _____ City, State, Zip: _____

Email Address: _____ Employer Name: _____

LIABILITY INSURANCE COVERAGE: A copy of your employer’s Certificate of Liability Insurance showing coverage limits and coverage dates **must be submitted with the application.**

APPLICANT SCREENING QUESTIONS:

1. Have you ever been convicted of a felony in the state of Iowa or any other federal or state jurisdiction? Yes No
If yes, please explain _____
2. Have you ever entered a plea of guilty or a plea of no contest to a felony accepted by the court in the state of Iowa or any other federal or state jurisdiction? Yes No If yes, please explain _____
3. Have you ever been convicted of, entered a plea of guilty to, or a plea of no contest to any crime where the potential penalty was imprisonment for more than one (1) year, whether or not imprisonment was actually imposed? Yes No
If yes, please explain _____
4. Have you ever been barred from operating as a fire protection system installer in another jurisdiction? Yes No
If yes, please explain fully on a separate sheet of paper, and include the name of the jurisdiction and the date(s) of the action(s) taken against you.

LICENSE ENDORSEMENTS: Please check all that apply. Applicant must possess at least one of the certifications listed below the selected endorsement.

Endorsement 1 – Automatic Sprinkler System (installation, maintenance, inspection and/or testing):

(Applicant must have one certification from List A and one certification from List B)

List A

- Completion of Sprinkler/Fitter Apprenticeship Program (attach copy of DOL certificate)
- Notarized 2-Year Work Affidavit

List B

- STAR Fire Sprinklerfitting Mastery Certification (attach copy of UA STAR card)
- NICET Level I or higher in Water-Based Layout **or** Inspection & Testing of Water-Based Systems (attach copy of NICET card)

Endorsement 2 – Special Hazards Fire System (installation, maintenance, inspection and/or testing):

(Applicant must have one certification from List A and one certification from List B)

List A

- Completion of Special Hazards Apprenticeship Program (attach copy of DOL certificate)
- Notarized 2-Year Work Affidavit

List B

- NICET Level I or higher in Special Hazards Suppression Systems (attach copy of NICET card)

Endorsement 3a – Pre-engineered Kitchen Fire Extinguishing Installer:

- Manufacturer or agent of pre-engineered manufacturer training (attach copy of training certificate)
- NICET Level I or higher in Special Hazards Fire System (attach copy of NICET card)
- NAFED/ICC Pre-Engineered Kitchen Fire Suppression Systems (attach copy of NAFED/ICC card)
- FPC Pre-Engineered Kitchen Fire Suppression Systems (attach copy of FPC certificate)

Endorsement 3b – Pre-Engineered Kitchen Fire Extinguishing Maintenance Worker:

- Manufacturer or agent of pre-engineered manufacturer training (attach copy of training certificate)
- NAFED/ICC Pre-Engineered Kitchen Fire Suppression Systems (attach copy of NAFED/ICC certificate)
- FPC Pre-Engineered Kitchen Fire Suppression Systems (attach copy of FPC certificate)
- NICET Level I or higher in Special Hazards (attach copy of NICET card)

- Endorsement 3c – Pre-Engineered Industrial Fire Extinguishing Installer:**
 - Manufacturer or agent of pre-engineered manufacturer training (attach copy of training certificate)
 - NICET Level I or higher in Special Hazards Fire System (attach copy of NICET card)
 - NAFED/ICC Pre-Engineered Industrial Fire Suppression Systems (attach copy of NAFED/ICC card)
 - FPC Pre-Engineered Industrial Fire Suppression Systems (attach copy of FPC certificate)
- Endorsement 3d – Pre-Engineered Industrial Fire Extinguishing Maintenance Worker:**
 - Manufacturer or agent of pre-engineered manufacturer training (attach copy of training certificate)
 - NAFED/ICC Pre-Engineered Industrial Fire Suppression Systems (attach copy of NAFED/ICC card)
 - FPC Pre-Engineered Industrial Fire Suppression Systems (attach copy of FPC certificate)
 - NICET Level I or higher in Special Hazards Fire System (attach copy of NICET card)
- Endorsement 4 – Installation & Maintenance of Pre-Engineered Water-Based Fire Protection Systems in 1& 2 Family Dwellings:**
 - Certification of system manufacturer training (attach copy of manufacturer training certificate)
 - NICET Level I or higher in Inspection and Testing of Water-Based Systems (attach copy of NICET card)
- Endorsement 5 – Fire Protection Installer & Maintenance Worker Trainee:** A trainee is defined as a person engaged in learning the fire protection industry trade under the direct supervision of a Responsible Managing Employee or a licensed Fire Protection System Installer. “Trainee” does not mean a person who is participating in a Department of Labor-approved apprenticeship program.

LICENSING FEES:

New Installer License: see Fee Schedule below \$ _____

Renewal Installer License: \$200 (not prorated) \$ _____

New and Renewal Installer Trainee - \$100 \$ _____

Additional Endorsements (not including first endorsement) _____ x \$25.00 \$ _____

*Endorsement 3a-d in any single or multiple combinations is **one** endorsement*

Total Fees Submitted \$ _____

Fee Schedule			
Jan-March = \$200	Apr-June = \$175	July-Sept = \$150	Oct-Dec = \$125

*All checks, warrants, or money orders shall be made payable to “**Iowa Department of Public Safety**”. We are unable to accept credit card payments at this time.*

I hereby certify that I am familiar with the Iowa statutes and administrative rules in regards to the Licensing Program for Fire Protection Systems and that all statements made by me on this application are to the best of my knowledge true and correct. I understand that any false statements or material misrepresentations on this application may be cause for denial, suspension, or revocation of the licensure. I further understand that the State Fire Marshal may deny, suspend, or revoke the licensure of an installer or assess a civil penalty to an installer, if any provision of these rules or any other provision of law related to operation as a fire protection system installer is violated.

Name: _____ Title: _____

Signature: _____ Date: _____

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VERIFICATION OF LICENSURE OR CERTIFICATION

Please complete this form and mail a copy to each state board or jurisdiction in which you are now or have ever been certified or licensed to practice as a(n) _____ installer. You may copy this form as many times as needed. Some boards require a fee for this service. Please contact them.

I am applying for a certification or license as a(n) _____ installer in the state of Iowa. The Iowa State Fire Marshal Division requests this form be completed by each state wherein I hold or have ever held certification or licensure. This is your authority to release any information in your files, favorable or otherwise, DIRECTLY to the Iowa State Fire Marshal Division, Licensing Administrator, 215 E 7th Street, Des Moines, IA 50319. Your early response is appreciated.

Signature of Applicant: _____ Name (please print): _____

Address of Applicant: _____

My certification or license number in your state is: _____

DO NOT DETACH -- This section is to be completed by an official of the state board and returned directly to the Iowa State Fire Marshal Division, Licensing Administrator.

State of: _____ Full name of Licensee: _____

Certification or License Number: _____ Original Certification or License/Issue Date: _____

Expiration Date: _____ Certification or License is Current? Yes No If No, please explain:

Has certification or license been suspended, revoked, placed on probation or otherwise disciplined? Yes No If Yes, please explain and attach documentation:

Has licensee ever been requested to appear before your board during a public meeting or discussion, or is there public record of any appearance before your board? Yes No If Yes, please explain and attach documentation:

Has licensee ever reported any criminal conviction(s)? Yes No If Yes, please explain and attach documentation:

Comments, if any: _____

Signature: _____

Title: _____

Date: _____

State Board: _____

State or Board Seal