



**OFFICE OF INSURANCE AND SAFETY FIRE COMMISSIONER**

COMMISSIONER OF INSURANCE • INDUSTRIAL LOAN COMMISSIONER • SAFETY FIRE COMMISSIONER

**Ralph T. Hudgens, Commissioner**

2 Martin Luther King Jr., Dr., Suite 920, West Tower, Atlanta, GA 30334

Phone: 404-656-7087 ♦ Fax: 678-717-5877



[www.oci.ga.gov](http://www.oci.ga.gov)

**SPRINKLER CONTRACTOR'S CERTIFICATE OF COMPETENCY  
SITE SUPERVISION FORM**

**SAFETY FIRE  
ENGINEERING &  
INSPECTION  
GID-352-SF AUG2012**

Facility Name: \_\_\_\_\_

Project Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ Zip: \_\_\_\_\_

Sprinkler Contractor's Name (Print): \_\_\_\_\_

Certificate of Competency's or Designee's Printed Name: \_\_\_\_\_

Certificate of Competency's or Designee's Signature: \_\_\_\_\_

Certificate of Competency's State License Number: \_\_\_\_\_

Site Visit Number (1st, 2nd, 3rd, etc.): \_\_\_\_\_

Total Visits to Date \_\_\_\_\_

Date of Visit \_\_\_\_\_

Owner/Owner's Representative/General Contractor/  
Representative's Name (Print): \_\_\_\_\_

Company Name (Print): \_\_\_\_\_

Signature: \_\_\_\_\_

Type of System(s) (Wet, Dry, etc.): \_\_\_\_\_

NFPA Standards System(s) was designed by: \_\_\_\_\_

**Upon project completion, the Certificate of Competency Holder affirms the installation meets or exceeds all requirements of the Safety Fire Commissioner's Rules and Regulations 120-3-3. This shall be signed by the Certificate of Competency Holder, only.**

C of C's Signature: \_\_\_\_\_ Date: \_\_\_\_\_