



# APPLICATION FOR FIRE SUPPRESSION SYSTEMS CONTRACTOR LICENSE

For further information call (215) 686-8686

YOU CAN APPLY FOR THIS  
LICENSE ONLINE USING  
ECLIPSE OR VISIT IN PERSON AT:

DEPARTMENT OF LICENSES AND INSPECTIONS  
CUSTOMER CARE UNIT  
PUBLIC SERVICE CONCOURSE  
1401 John F. Kennedy Boulevard  
Philadelphia, PA 19102

Use a single check for all fees payable to "City of Philadelphia"

1. COMPANY NAME			2. COMPANY TELEPHONE NUMBER		
3. COMPANY ADDRESS - STREET			CITY		STATE
					ZIP CODE
4. NAME OF OWNER / PRINCIPAL			5. TITLE		6. HOME TELEPHONE NUMBER
7. HOME ADDRESS - STREET			CITY		STATE
					ZIP CODE
8. BUSINESS INCOME AND RECEIPTS TAX NUMBER	9. COMMERCIAL ACTIVITY LICENSE NUMBER		10. APPLICANT FEDERAL TAX OR SOCIAL SECURITY NUMBER		11. APPLICANT DATE OF BIRTH MONTH / DAY / YEAR
12. LIABILITY INSURANCE CARRIER (ATTACH CERTIFICATE OF LIABILITY INSURANCE)			13. POLICY NUMBER		14. AMOUNT \$
15. WORKMEN'S COMPENSATION INSURANCE CARRIER (ATTACH CERTIFICATE OF INSURANCE)					16. POLICY NUMBER
17. PREVIOUSLY LICENSED IN PHILADELPHIA LICENSE# _____ YEAR _____			18. PREVIOUSLY LICENSED OTHER THAN PHILADELPHIA WHERE _____ LICENSE _____ YEAR _____		

19. LICENSE TYPE	LICENSE FEE	LICENSE CODE	EXPIRATION DATE	LICENSE NUMBER
<input type="checkbox"/> SUPPRESSION SYSTEMS CONTRACTOR	\$258.00	3525	4/30/	
<input type="checkbox"/> COMMERCIAL ACTIVITY	\$300.00	3702	NONE	

LIST FULL-TIME EMPLOYEES WHO HOLD A FIRE SUPPRESSION SYSTEMS CERTIFICATE (WORKERS LICENSE).

TYPE (I, II, III)	NAME	CERTIFICATE NO.	TYPE (I, II, III)	NAME	CERTIFICATE NO.

## 20. CORPORATIONS AND PARTNERSHIPS (LIST THREE PRINCIPALS OR PARTNERS)

NAME OF PRINCIPAL OR PARTNER	TITLE	HOME ADDRESS (INCLUDE CITY, STATE, ZIP CODE)

## 21. APPLICANT CERTIFICATION

I hereby certify that the statements contained herein are true and correct to the best of my knowledge and belief. I understand that if I knowingly make any false statement herein I am subject to the possible revocation of any license issued as a result of my false application, and such other penalties as may be prescribed by law.

APPLICANT'S SIGNATURE \_\_\_\_\_

# FIRE SUPPRESSION SYSTEMS CONTRACTOR'S LICENSE INFORMATION SHEET

For further information on the application process, call 215-686-8686

A Fire Suppression Systems Contractor's License is required to perform work on fire suppression systems in Philadelphia. This includes installation, alteration, repair, testing, servicing, maintenance and inspection or certification.

## **Requirements to obtain a Fire Suppression Systems Contractor's License include:**

- 1) License application
- 2) A non-refundable fee of \$100.00 which is applied towards the cost of the License.
- 3) A Philadelphia Business Income and Receipts Tax Number and a Commercial Activity License.
- 4) Proof of insurance in an amount determined by the Office of Risk Management in the following areas:
  - General Liability: **\$500,000 per occurrence**
  - Automobile Liability Insurance: **\$300,000**
  - Workman's Compensation:
    - **\$100,000 per accident**
    - **\$100,000 per employee**
    - **\$500,000 policy limit**

*ALL INSURANCE MUST BE SUBMITTED ON A CERTIFICATE OF LIABILITY  
INSURANCE: NO EXCEPTIONS.*

- 5) Proof of qualifications as noted below:
  - a) At least one full-time employee with a Fire Suppression Systems Worker License.
  - b) At least one full-time employee who meets one of these criteria:
    - Holds a NICET certificate at Level II or higher in the applicable category.
    - Registered as a professional engineer in the Commonwealth of Pennsylvania with relevant experience designing fire suppression systems.

**Note: These individuals can only be employed by one fire suppression systems contractor.**