



Application for Fire Suppression System Worker and Apprentice License

Complete and submit this application for a **NEW** Fire Suppression System Worker License, a Fire Suppression System Apprentice License, a Fire Suppression Worker - Specialty License, a Fire Suppression Worker - Kitchen Fire Extinguishing System License.

PART A	A	Type of License (select one):
<ul style="list-style-type: none"> License Type Select the appropriate license. Applicant Information Provide the contact information for the applicant. 		<input type="checkbox"/> Fire Suppression System Worker License <input type="checkbox"/> Fire Suppression System Apprentice License <input type="checkbox"/> Fire Suppression Worker - Specialty License <input type="checkbox"/> F.S.W. - Kitchen Fire Extinguishing System License
		Applicant Name: _____
		Applicant Address: _____
		Applicant Email: _____ Phone #: _____

PART B	B	Supplemental Information	Verify the following information:
<ul style="list-style-type: none"> Confirm the required documentation is provided for the specific license: (A) Fire Suppression Systems Worker License (B) Fire Suppression Worker Specialty License (C) F.S.W. - Kitchen Fire Extinguishing System License (D) Fire Suppression System Apprentice <p><small>*Please be sure to redact your SSN from the PSSA form.</small></p>		<ul style="list-style-type: none"> Photo identification (2 in. x 2 in., color) is provided with this application: <input type="checkbox"/> Yes <p>(A) Fire Suppression System Worker:</p> <ul style="list-style-type: none"> Successful completion of a Registered Fire Suppression System Apprentice Program with the United States Department of Labor or a State Apprenticeship Council: <input type="checkbox"/> Yes <input type="checkbox"/> N/A Successful completion of the examination for Fire Suppression Installer / Worker as administered by the International Code Council within one year from submission of this application: <input type="checkbox"/> Yes <input type="checkbox"/> N/A <p>(B) Fire Suppression Worker - Specialty:</p> <ul style="list-style-type: none"> Successful completion of the ASSE 15010 Water-Based Fire Protection Certification as administered by the American Society of Sanitary Engineers: <input type="checkbox"/> Yes <input type="checkbox"/> N/A Fire Suppression System Worker license is active: <input type="checkbox"/> Yes <input type="checkbox"/> N/A <p>(C) F.S.W. - Kitchen Fire Extinguishing System:</p> <ul style="list-style-type: none"> Successful completion of the NICET Level III Certification in Special Hazards Systems: <input type="checkbox"/> Yes <input type="checkbox"/> N/A <p>(D) Fire Suppression System Apprentice</p> <ul style="list-style-type: none"> *Program Sponsor and Apprenticeship Agreement (PSAA) form as proof of enrollment in a Registered Fire Suppression System Apprenticeship Program with the United States Department of Labor or a State Apprenticeship Council is provided with this application: <input type="checkbox"/> Yes <input type="checkbox"/> N/A <p>Note: The PSAA form must include at least 8,000 hours of practical experience in the installation or maintenance of fire suppression systems and at least 800 hours of classroom, shop or related instruction in the fire suppression system trade. If you or your apprenticeship sponsor does not have a copy of this PSAA form, your sponsor may obtain a copy through the RAPIDS system.</p>	

PART C	C	Limits and Conditions	<ul style="list-style-type: none"> No person shall perform work on a fire suppression system who does not have a valid fire suppression system certificate in the classification relating to the work performed. An apprentice must work under the supervision of a licensed fire suppression system worker. Any person performing work must be employed by a licensed fire suppression systems contractor. No person shall knowingly or recklessly make any misrepresentation or omission regarding the status of a person's fire suppression system certification or apprentice permit OR fire suppression system work which has been or will be performed. Any certification or other documentation indicating testing or inspection of a fire suppression system shall be completed only by the licensed person. Meet all other requirements set forth in the Philadelphia Code.
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Declaration and Signature

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 such penalties as may be prescribed by law or ordinance.

Applicant's Signature: _____

Date: _____