

Seattle Fire Prevention Division

220 3rd Avenue South, 2nd Floor Seattle, WA 98104

FIRE AND LIFE SAFETY CERTIFICATION

	_fmo_certification@seattle.gov				
SEATTLE		Fee Paid:	OFFICE USE ONLY	OFFICE USE ONLY Exam ID: Score:	
Exam	\$515				
Replacement Card	\$70	Receipt No:	Retest?	Letter: P F	
Renewal *	Address Update	State Cert Verified?	Ans Sheet Mailed:	Cert Card Mailed:	
SECTION 1: TECHNICIAN INFORMATION		SECTION 2: COMPA	SECTION 2: COMPANY INFORMATION		
First Name: Middle Initial:		Company Name:	Company Name:		
Last Name: Sex: Male Female		le Supervisor Name:_	Supervisor Name:		
Certificate #: (leave blank for 1st time applicants)		cs) Company Address:	Company Address:		
Date of Birth: Phone:		City:	City: State: Zip:		
Address:		Work Phone:	Work Phone:		
City: State: Zip:		Email:	Email:		
Driver's License #		Where would you l	Where would you like your card/results mailed?		
Email:		(check one)	(check one) Home Work Hold for Pickup		
SECTION 3: TYPE OF TEST/CERT	ΓΙFICATE				
Automatic Sprinklers: Engineered Systems:			Emergency Generators: Fire Alarm Systems:		
AS-ITT (S)	(Includes Pre-Engineered Systems) E-1	∐ EG-1	<u> </u>		
☐ AS-2 (S)	E-2	☐ EG-ITM	FA-	ITM	
AS-3 (S)	☐ E-3	Fire Extinguishers:	<u>Smoke</u>	Control System:	
Fire Pump Systems:	E-4KH	FEX-1	SC-	1	
FP-1	E-4SB	FEX-2	SC-	ITM	
FP-ITM	E-4Combo	FEX-3	Standn	ina Systam:	
	E 40011100	FEX-4		ipe System: P-ITM	
SECTION 4: CUSTOMER ACKNO					
	ovide on this form is correct to the best o e for denial, suspension, or revocation o			-	
• • • • • • • • • • • • • • • • • • • •	ender the certificate upon demand of the	•			
the certificate for which I am apply	ying periodically change and I am respon	nsible for monitoring and co	emplying with those chang	ges; (4) it is the responsibility	
	certificate up to date, and that it is a crim		n any of the work regulate	d by Seattle Fire Department	
	irst having a valid certificate.	_ (initials)	okat (bttps://saattla.gov/f	iro/husinoss	
	d and understood the latest SFD Certifications to the last four fications tudypacket) within the last four			ire/business-	
Affidavit for FA Series, AS Series, I	E Series, and SC Series Certificate Holder	rs Only Regarding State Re	quired Certifications: The	old a valid:	
AS-2,3: WA State issued Certification of Competency for work on			AS-ITT: WA State issued Certification of Competency OR American		
sprinkler systems			Society of Sanitary Engineers 15010 Field Technician Certification		
E-1,2,3: NICET II Certification (Spec Haz Supp Systems)			☐ E-4KH: NICET II or ICC/NAFED for Pre-Eng Kitchen Fire Ext Systems ☐ E-4SB: NICET II for Pre-Eng Industrial Fire Ext Systems		
E-4Combo: NICET II Certificat				•	
	arm Technician (CFAT) Level II Fire or a N vith RCW 19.27.720(b), including ICB or o			esting	
	bility to maintain a current/valid certifica	·		D Certification, and that	
	d the State required certification are req			in Seattle.	
	red to attach a current copy of the State of		I: Yes No		
My signature indicates that I h	ave read and understand the above	}.			
SIGNATURE (print and sign with pen) DA		ATE		ED TEST DATE	
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