

PIKES PEAK REGIONAL BUILDING DEPARTMENT

Fire Alarm Contractor & Installer Licenses

Review the type of work to be performed with the contractor descriptions listed below. If necessary, discuss your licensing needs with the Fire Authority. Pikes Peak Regional Building Department processes applications and registration on behalf of the Colorado Springs Fire Department.

Fire Alarm A (Contractor)

Design, installation, alteration, service, repair, program, test, inspect, maintain and additions to fire alarm systems. The licensee is authorized to obtain rough-in electrical permits from Regional Building Department that will inspect wiring for compliance with the currently adopted National Electrical Code. Requirements include:

Minimum Level III or IV Certification by National Institute for Certification in Engineering Technologies (NICET);

or

Professional Engineer license issued by the state of Colorado;

Documentation of five years work experience in this area;

If Company (or similar entity), provide proof of at least one permanent RME (responsible managing employee) who meets the qualifications;

or

If individual, meet the qualifications of an RME;

Certificates of Insurance.

Fire Alarm B (Company or Organization)

Installation, service, repair, test, and inspect fire alarm systems. The licensee is authorized to obtain rough-in electrical permits from Regional Building Department that will inspect wiring for compliance with the currently adopted National Electrical Code. The license is issued jointly in the name of the company and the RME (Responsible Managing Employee) who must be active in the day-to-day operations. Requirements include:

Minimum Level II or higher Certification by National Institute for Certification in Engineering Technologies (NICET);

or

Professional Engineer license issued by the state of Colorado;

Documentation of 5 years work experience;

Certificates of Insurance.

Fire Alarm On-Site Installer

Employed by a Fire Alarm Contractor A or B, and active in the day-to-day operations. Requirements include:

Minimum Level II Certification by National Institute for Certification in Engineering Technologies (NICET);

or

FA2 Examination;

Documentation of 2 years work experience.

LICENSE APPLICATION

The Fire Board of Appeals reviews and grants license requests. The application form, attachment of requirements, and application fee must be submitted before the license request is placed on the meeting agenda. Deadline is two weeks before the scheduled meeting. The application fee is nonrefundable and payable by cash, Visa, Mastercard or check made out to RBD. Contact the Division of Fire Marshal for information on the meeting schedule.

FIRE ALARM CONTRACTORS A & B	FIRE ALARM ON-SITE INSTALLER
Application form	Application form
\$50 Fee	\$50 Fee
Experience	Copy of NICET Level II Certification
Copy of NICET Certifications	Criminal Background check performed by RBD
Insurance	
Affidavit	
Criminal Background check performed by RBD	

Fire Alarm Contractor & Installer License Applications

LICENSE ISSUANCE

Within 60 days of the Fire Board of Appeals' decision to grant a license, the examinee must come to Regional Building Department to obtain the license. (This license is granted by the fire authority and registered with Regional Building Department.) After 60 days, an unclaimed license is voided and the entire application file is discarded. Work cannot be solicited, contracted or performed until the license is issued to you.

INSURANCE — FIRE ALARM CONTRACTOR A & B LICENSES

Liability Insurance Certificate
Workers' Compensation Certificate or **"Letter to Exempt"** if examinee has no employees.
License fee payment

Liability Insurance

Insurance Certificates must include:

"Insured" The name of the insured matches exactly the name of the company on your application/license.

"Certificate Holder" must be stated as: **Pikes Peak Regional Building Department**
2880 International Circle, Colorado Springs, CO 80910

Policy Number is to be on the certificate. A certificate that indicates the policy is pending or temporary will result in a 30-day binder. The policy number must be provided within 30 days to maintain an active license.

10-day Cancellation Notification Clause

Coverage Meets or exceeds minimum general liability coverage (stated below by license type).
Certificate must include coverage of premises, operations, products and completed operations.

Liability Policy

Bodily injury	Property damage	Combined Single Limit
\$50,000/\$100,000	\$100,000	\$300,000

Workers' Compensation

A current certificate of Workers' Compensation in compliance with the state of Colorado statutes is required.

A license examinee who has no other employees may exempt from Workers' Compensation, but the examinee must sign the "Letter to Exempt" form. Request this form from the Contractors Licensing Office at Regional Building Department. (License renewal requires the examinee to update this status by checking off the appropriate box on the renewal form.)

LICENSE FEE

License fees are paid before license issuance and future renewals. Fees are not prorated for any portion of the year.

Fire Alarm Contractor A \$75 Fire Alarm Contractor B \$50 Fire Alarm Installer \$10

Licenses are valid for 12 months from the date of issuance, and expire on the last day of the month in which the license was issued. The date of issuance does not change regardless of a late renewal or other factors.

No permits can be obtained or work continued under open permits after the date that the license expires.

PIKES PEAK REGIONAL BUILDING DEPARTMENT

Fire Alarm Contractor License Application

Receipt #

It is requested that the Fire Board of Appeals of the Colorado Springs Fire Department consider this application for the stated license in compliance with the Pikes Peak Regional Building Code.

FIRE ALARM LICENSE REQUESTED (circle one)

A B

COMPANY INFORMATION

Type of company (circle one) Individual Partnership Corporation LLC

NAME OF COMPANY _____

Mailing address _____ City _____ State _____ Zip _____

E-mail address _____ Phone () _____

Fax () _____

COMPANY'S PRINCIPAL OFFICERS, PARTNERS OR OWNERS

Name _____ Title _____

Name _____ Title _____

APPLICANT'S AFFILIATION WITH THE COMPANY (License Holder)

Full Name _____ SSN _____ Date of Birth _____

Address _____ City _____ State _____ Zip _____

Phone _____ E-mail _____

LIST YOUR 3 MOST RECENT POSITIONS AS EMPLOYEE/SUPERVISOR

	<i>Dates</i>	<i>Company</i>	<i>Address</i>	<i>Position</i>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

RME (Responsible Managing Employee)

Name _____ SSN _____

Address _____ City _____ State _____ Zip _____

Phone _____ E-mail _____

NICET Certificate # _____ NICET Level _____

Professional Engineer Licensed by state of Colorado # _____ Date _____

Fire Alarm Contractor License Application

LICENSES HELD BY THIS COMPANY *(Attach copies of licenses)*

Jurisdiction — License type and number	Jurisdiction — License type and number
_____	_____
_____	_____
_____	_____

List work project in which this company worked as the contractor:

Location (Specific)	Type (Res. or Comm.)	Estimated Project Cost	Date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

How long has this firm operated as a contractor? _____ *(If less than a year, write "new")*

Type of work primarily? Residential _____ Commercial _____

Have you ever been convicted of a felony? _____ If so, explain _____

Has this company ever defaulted on a contract? _____ If so, explain _____

Has a mechanic's lien judgement ever been filed against property on which the firm was the contractor? _____

If so, explain _____

Has this company been a defendant in a collection action court case? _____ If so, explain _____

Have you or the company ever declared bankruptcy? _____ if so, explain _____

CERTIFICATION

The undersigned individual, partnership or corporation, does hereby declare and warrant that the above named owner, principal or manager for a contractor's license has the express authority to bind this company, partnership or corporation by his application herein; and further, the company does hereby agree to abide by the ordinances and regulations promulgated by the city of Colorado Springs and the county of El Paso, and adopted by other municipal entities within El Paso County in regards to any work which may be done by this firm pursuant to the applied contractor's license.

Signature _____ Date _____

Print Name and title (owner, principal or manager) _____

I, the undersigned, do hereby submit application for the stated contractor's license as the RME (Responsible Managing Employee) or Licensee for the firm named herein. I do hereby expressly represent, and warrant, that I am acting in capacity of the RME/Licensee of said firm; and I hereby agree to accept the responsibilities for said company's and my own actions in connection with the contractor's license that may be granted. Pikes Peak Regional Building Department requires all persons seeking a license to undergo a **CRIMINAL BACKGROUND CHECK**. By filing this application with Pikes Peak Regional Building Department you understand and agree that Pikes Peak Regional Building Department will undertake a **CRIMINAL BACKGROUND CHECK**. Some of the information I am providing in this application will be used to check my **CRIMINAL BACKGROUND**. I understand that Pikes Peak Regional Building Department may deny me a license after reviewing my **CRIMINAL BACKGROUND**. I hereby authorize Pikes Peak Regional Building Department to perform a **CRIMINAL BACKGROUND** check. I further agree and understand that if any information provided by me on this application is untrue, that any license granted to me by Pikes Peak Regional Building Department on behalf of the Colorado Springs Fire Department is automatically revoked.

Signature _____ Date _____

Print Name and title (RME) _____

Signature _____ Date _____

Print Name and title (Licensee) _____

PIKES PEAK REGIONAL BUILDING DEPARTMENT

Fire Alarm Installer License Application

Receipt #

It is requested that the Fire Board of Appeals of the Colorado Springs Fire Department consider this application for the stated license in compliance with the Pikes Peak Regional Building Code.

APPLICANT INFORMATION

Full Name _____ SSN _____ Date of Birth _____

Address _____ City _____ State _____ Zip _____

Home Phone () _____ Work Phone () _____

E-Mail address _____

Work History

Employer _____ Dates _____

Job duties: _____

Employer _____ Dates _____

Job duties: _____

Supervisors for whom you worked as references for this license:

Name _____ Company _____

Address _____ Phone () _____

Name _____ Company _____

Address _____ Phone () _____

Certifications and Licenses:

NICET Certificate # _____ NICET Level _____

Other _____ License # _____ City/State _____

Have you even had a license revoked or suspended? ____ If yes, explain _____

Have you ever been convicted of a felony? ____ If yes, explain _____

Have you ever falsely used the license of another? ____ If yes, explain _____

CERTIFICATION

Pikes Peak Regional Building Department requires all persons seeking a license to undergo a **CRIMINAL BACKGROUND CHECK**. By filing this application with Pikes Peak Regional Building Department you understand and agree that Pikes Peak Regional Building Department will undertake a **CRIMINAL BACKGROUND CHECK**. Some of the information I am providing in this application will be used to check my **CRIMINAL BACKGROUND**. I understand that Pikes Peak Regional Building Department may deny me a license after reviewing my **CRIMINAL BACKGROUND**. I hereby authorize Pikes Peak Regional Building Department to perform a **CRIMINAL BACKGROUND** check.

I further agree and understand that if any information provided by me on this application is untrue, that any license granted to me by Pikes Peak Regional Building Department is automatically revoked. I may appeal the revocation to the Board of Review ("Board") by filing a notice of appeal with the Board within thirty (30) days of the date of the notice sent to me by Pikes Peak Regional Building Department. If the appeal is not received by Pikes Peak Regional Building Department within the thirty (30) days, my right to appeal is forever waived.

Signature _____ Date _____