

## **Texas Department of Insurance**

**State Fire Marshal's Office** Mail Code 112-FM 333 Guadalupe • P. O. Box 149221, Austin, Texas 78714-9221 512-305-7900 • 512-305-7922 fax • www.tdi.state.tx.us

## FIRE SPRINKLER RESPONSIBLE MANAGING EMPLOYEE (RME) LICENSE APPLICATION

This application must be accompanied by all documents and information required by Article 5.43-3 of the Texas Insurance Code and the Fire Sprinkler Rules, AND THE <u>ORIGINAL</u> SCORE REPORT RECEIVED FROM THOMSON PROMETRIC SHOWING A PASSING SCORE FOR THE REQUIRED EXAMS.

Complete answers must be given to all questions.

Please print or type.

Any fraudulent representation on this application may be cause for denial, suspension, or revocation of a license.

		-refun	dable, exce	ept for overpaym	ents	resulting from r	nistakes	of law	or fact.							
LIC	ENSE															
CHECK ONE TYPE OF LICENSE								LICENSE FEE		CODE				DO NOT SUBMIT THIS		
		Responsible Managing Employee –					General			\$200		APPLICATION UN				
		Responsible Managing Employee –				General and Dwelling			\$200		573-06	` '	ALL TEST REQUIREMENTS			
	Responsible Managing Employee –					Dwelling			\$150		573-08		HAVE BEEN MET			
		Res	ponsible Ma	anaging Employe	Underground Fire Main			\$150		573-10	)					
Responsible Managing Employee –						General Inspector			\$ 50		573-11	I				
API	PLICANT							-				-				
LAST NAMF						FIRST NAME AND MIDDLE NAME				НΩ	ME AREA COI	OF AND TE	ND TEI EPHONE			
HOME ADDRESS						CITY	<del>,</del>		STATE		ZIP CODE					
E-MAIL ADDRESS FOR NOTIFICATION PURPOSES (optional)						WEB SITE ADDRESS (optional)										
COUNTY DRIVER'S LICENSE NUMB					ER AND STATE SC			IAL SECURI	TY NUME	BER	R DATE OF BIRTH			BIRTH		
WEIG	SHT		HEIGHT	L	SEX	COLOR			R OF HAIR CO				OLOR OF EYES			
API	PLICANT'S	EMPL	OYER													
NAME OF FIRM  AREA CODE AND TELEPHO										TEI EPHON	-IUNE					
FIRE SPRINKLER CERTIFICATE OF REGISTRATION NUMBER (OR "NEW APPLICATION PENDING")									DATE OF HIRE			COUNTY				
SCI	R-															
ADDRESS OF FIRM										CITY		STATE		ZIP CODE		
OU	ESTIONS															
1								YES		YES NO						
	(NICET) ex	amina	ation require	ements for certifi	catio						Level II		Level III			
		ection automatic sprinkler systems layout?														
If yes, attach a copy of NICET's notification letter confirming successful completion.  2 Have you completed National Institute for Certification in Engineering Technologies  YES									NO							
Have you completed National Institute for Certification i (NICET) examination requirements for certification at Le												NO				
	Testing of Water-Based Systems?								Level II		П					
	If yes, attach a copy of NIČET's notification letter confirming successful completion.									ш		□				

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QU	ESTIONS (cont)						
3	Are you a professional engineer registered in Texas? If yes, attach current proof of registration.	YES	NO 🗆				
4	Do you hold a current license issued by the Texas State Fire Marshal?  If yes, print license number(s) here.	YES NO					
5	Have you ever held a license issued by the Texas State Fire Marshal that is not shown in question 3 above?	YES NO					
6	Have you ever had a permit or license denied, suspended, or revoked?  If yes, give details on a separate sheet and attach it to this application.	YES	NO				
7	Have you ever been convicted of a misdemeanor or a felony (including any pending adjudication)? If yes, give details on a separate sheet and attach it to this application.	YES	NO				
RES	SIDENCE HISTORY						
Have you resided in any other state besides Texas, or foreign country, in the last 10 years?   YES NO If yes, list other states and/or countries.							
Please attach your criminal history report from any state other than Texas where you lived for a total of six months or more. The report should be a current statewide report showing that a search for misdemeanor and felony convictions was made and giving the results of that search. Our office can provide information about specific state requirements and agencies to contact. If you were on active duty with the United States military when you lived outside of Texas, it may be possible for you to submit a copy of your military discharge, DD Form 214, MEMBER-4 copy showing honorable service, instead of the state reports.							
	NATURES						
In applying for a fire sprinkler license, I certify that I will comply with Article 5.43-3 of the Texas Insurance Code and the Fire Sprinkler Rules.  By my signature, I verify that the information on the application and its attachments are true.  I understand that knowingly providing a false answer to any question or submitting false information or documents with this application may be tampering with a governmental record which is punishable under the Texas Penal Code Chapter 37, §37.10.  SIGNATURE OF INDIVIDUAL APPLICANT  DATE							
I certify that this applicant will be a full-time part-time employee of the firm and upon receipt of a license is designated to represent this firm, subject to Article 5.43-3 of the Texas Insurance Code and the Fire Sprinkler Rules.  We know of no reason why the applicant should be denied a license.  By my signature, I verify that the information on this application and its attachments are true.  I understand that knowingly providing a false answer to any question or submitting false information or documents with this application may be tampering with a governmental record which is punishable under the Texas Penal Code Chapter 37, §37.10.  DATE							
PRITI	NED NAME	TITLE					

Check or money order should be made payable to the Texas Department of Insurance. Mail this completed application along with appropriate fee and any additional documents to:

Mailing Address: State Fire Marshal's Office

Mail Code 9999 P. O. Box 149221 Austin, TX 78714-9221 Physical Address:

State Fire Marshal's Office

333 Guadalupe Austin, TX 78701

Telephone No. 512-305-7934 Fax No. 512-305-7922

Web Site Address: <u>www.tdi.state.tx.us/fire</u>

## NOTICE ABOUT CERTAIN INFORMATION LAWS AND PRACTICES

With few exceptions, you are entitled to be informed about the information that the Texas Department of Insurance (TDI) collects about you. Under sections 552.021 and 552.023 of the Texas Government Code, you have a right to review or receive copies of information about yourself, including private information. However, TDI may withhold information for reasons other than to protect your right to privacy. Under section 559.004 of the Texas Government Code, you are entitled to request that TDI correct information that TDI has about you that is incorrect. For more information about the procedure and costs for obtaining information from TDI or about the procedure for correcting information kept by TDI, please contact the Agency Counsel Section of TDI's Legal & Compliance Division at (512) 475-1757 or visit the Corrections Procedure section of TDI's web page at www.tdi.state.tx.us.

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