

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

License Revision/Transfer Application for Individuals For All Types of Fire Sprinkler Licenses

This form should be completed for RMEs who are requesting a license under a registered firm other than that shown on their license or who are changing employment status at their current firm, or who wish to change their type of RME license.

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

All fees are non-refundable, except for overpayments resulting from mistakes of law or fact.

Austin, Texas 78714-9221

Fax No. 512-305-7922

CHECK ONE	,	T\/D	<u> </u>	OLIANOE						0005		
CHECK ONE	TYPE OF CHANGE						FEE		CODE			
	Transfer from one firm to another. (Attach surrendered license.) State name of company transferring from:						\$ 35.00		573-04			
	Additional license under another firm.							\$ 35.00		573-04		
	Add RME – Dwelling in addition to current RME – General license. The \$35 fee can be paid after successful completion of the seminar and exam.						\$50 exam fee plus \$35		573-05 573-04			
	Change in full-	-time/part-time employ	men	nent status.				No fee				
TO BE COMPLETED BY RESPONSIBLE MANAGING EMPLOYEE (RME)												
LAST NAME			1	`				RE CODE AND TELEPHONE				
HOME ADDRESS			l	CITY			;	STATE		ZIP CODE		
COUNTY	OUNTY LICENSE NUMBER					E-MAIL ADDRESS FOR NOTIFICATION PL				RPOSES (optional)		
RME-												
EFFECT DATE OF CHANGE												
If you are a professional engineer registered in Texas, attach current proof of registration.												
I will be a full-time employee part-time employee of the firm named below, working hours per week.												
SIGNATURE OF INDIVI		DATE										
TO BE COMPLETED BY EMPLOYER												
I certify that this applicant will be a \Box full-time employee \Box part-time employee and will represent this firm upon licensing, 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 any attachments is 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.												
NAME OF REGISTERE	FIRE SPRINKLERCERTIFICATE OF REGISTRATION NO.											
					SCR-							
SIGNATURE OF AUTHORIZED REPRESENTATIVE OF FIRM					DATE							
PRINTED 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 Mail Code			Physical A	ddress:	State Fire Mai	e Street					

NOTICE ABOUT CERTAIN INFORMATION LAWS AND PRACTICES

Telephone No.

Web Site Address:

512-305-7934

www.tdi.state.tx.us/fire

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.

SF038 Rev. 08/05 Page 1 of 1