

Application for Certification for an Alarm System Installer



**IOWA STATE FIRE MARSHAL'S OFFICE
215 E 7th STREET
DES MOINES, IA 50319
PH: 515-725-6145 FAX: 515-725-6172**

NEW AMEND RENEWAL

This form is to be used to apply for certification as an Alarm System Installer in the State of Iowa. This certification program is governed by Iowa Code Section 100C.7 and Iowa Administrative Rules Chapter 277. Additional information on this program is available at:
<http://www.dps.state.ia.us/fm/alarm/forms.shtml>. Please type or print legibly if not completing online.

APPLICANT INFORMATION: (* optional information)

| | | |
|--------------------------------|-------------------------|--------------------------------------|
| Name (Last, First, MI): | Phone: | *E-mail: |
| Home Address: | | City, State, Zip: |
| *Employer's Name: | *Business Phone: | *Business E-mail: |
| *Employer's Address: | | *Employer's City, State, Zip: |

Have you been registered, licensed and or certified in another state or local jurisdiction to perform similar work: Yes No.

*** If yes, please complete the information requested in the box below (attach additional sheets if necessary):

| Jurisdiction(s) issuing license or certification: | Describe if any, disciplinary actions taken against the applicant: |
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CERTIFICATION ENDORSEMENTS:

I am applying for endorsements in the following areas: (check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> 1) Fire Alarm System Installer <input type="checkbox"/> 2) Nurse Call System Installer <input type="checkbox"/> 3) Security Alarm System Installer <input type="checkbox"/> 4) Alarm System Maintenance Inspection Installer | <input type="checkbox"/> 5) Dwelling Unit Alarm System Installer <input type="checkbox"/> 6) Alarm System Component Installer <input type="checkbox"/> 7) Alarm System Installer Assistant |
|--|--|

If applying for Fire Alarm System Installer on this application, check the method below by which the Installer requirements of Rule 277.6(1) b. are being met:

- Current licensure as a professional engineer by the State of Iowa. PE# _____.
- OR**
- Current certification by the National Institute for Certification in Engineering Technologies (NICET) at level II or higher in fire alarm systems.
NICET Certification number _____ and Expiration Date: _____.
- OR**
- Current certification of National Burglar and Fire Alarm Association (NBFAA) Advanced Alarm System Technician (level 2) course or higher and documented two years of related work experience.
- OR**
- Has satisfactory completed an applicable third party training or certification program which has been pre-approved by the state fire marshal. Specify approved program: _____.

If applying for Nurse Call System Installer on this application, check the method below by which the Installer requirements of Rule 277.6(1) c. are being met:

- Current licensure as a professional engineer by the State of Iowa. PE# _____.
- OR**
- Current certification by a nurse call system manufacturer. System Manufacturer _____.
- OR**
- Documented training by the certified nurse call contractor employer.
- OR**
- Current licensure as a master electrician or journeyman electrician by the electrical examining board, pursuant to Iowa code chapter 103.
- OR**
- Current certification by the National Institute for Certification in Engineering Technologies (NICET) at level I or higher in fire alarm systems or audio systems.
NICET Certification number _____ and Expiration Date: _____.
- OR**
- Completion of NBFAA Certified Alarm Technician (Level 1) course or higher.
- OR**
- Has satisfactory completed an applicable third party training or certification program which has been pre-approved by the state fire marshal. Specify approved program: _____.

If applying for Security Alarm System Installer on this application, check the method below by which the Installer requirements of Rule 277.6(1) d. are being met:

- Current licensure as a professional engineer by the State of Iowa. PE# _____.
- OR**
- Completion of NBFAA Certified Alarm Technician (Level I) or higher.
- OR**
- Current certification by the National Institute for Certification in Engineering Technologies (NICET) at level I or higher in fire alarm systems or audio systems.
NICET Certification number _____ and Expiration Date: _____.
- OR**
- Has satisfactory completed an applicable third party training or certification program which has been pre-approved by the state fire marshal. Specify approved program: _____.

If applying for Alarm System Maintenance Inspection Installer on this application, check the method below by which the Installer requirements of Rule 277.6(1) e. are being met:

- Current licensure as a professional engineer by the State of Iowa. PE# _____.
- OR**
- Completion of NBFAA as a Certified Alarm Technician (Level I) or higher.
- OR**
- Current certification by the National Institute for Certification in Engineering Technologies (NICET) at level I or higher in fire alarm systems or audio systems.
NICET Certification number _____ and Expiration Date: _____.
- OR**
- Has satisfactory completed an applicable third party training or certification program which has been pre-approved by the state fire marshal. Specify approved program: _____.

If applying for Dwelling Unit Alarm System Installer on this application, check the method below by which the Installer requirements of Rule 277.6(1) f. are being met:

- Current licensure as a professional engineer by the State of Iowa. PE# _____.
- OR**
- Completion of NBFAA as a certified alarm technician (Level I) or higher.
- OR**
- Current certification by the National Institute for Certification in Engineering Technologies (NICET) at level I or higher in fire alarm systems or audio systems.
NICET Certification number _____ and Expiration Date: _____.
- OR**
- Current licensure as a master electrician or journeyman electrician by the electrical examining board, pursuant to Iowa code chapter 103.
- OR**
- Has satisfactory completed an applicable third party training or certification program which has been pre-approved by the state fire marshal. Specify approved program: _____.

If applying for Alarm System Component Installer on this application, check the method below by which the Installer requirements of Rule 277.6(1) g. are being met:

- Current licensure as a professional engineer by the State of Iowa. PE# _____.
- OR**
- Completion of NBFAA as a certified alarm technician (Level I) or higher.
- OR**
- Current certification by the National Institute for Certification in Engineering Technologies (NICET) at level I or higher in fire alarm systems or audio systems.
NICET Certification number _____ and Expiration Date: _____.
- OR**
- Current licensure as a master electrician or journeyman electrician by the electrical examining board, pursuant to Iowa code chapter 103.
- OR**
- Has satisfactory completed an applicable third party training or certification program which has been pre-approved by the state fire marshal. Specify approved program: _____.

If applying for Alarm System Installer Assistant on this application, check the method below by which the Installer requirements of Rule 277.6(1) g. are being met:

NOTE: An Alarm System Installer Assistant may perform work which requires certification under this chapter only under direct supervision of an alarm installer whose certification contains one or more endorsements provided in subrule 277.6(1), paragraphs "a" through "f" and that work must be within the scope of work authorized by the endorsements held by the supervising installer.

Make application to the State of Iowa.

FEES:

| | |
|--|-----------|
| Installer Certification Fee (Three Year Certification - \$150.00) | \$ |
| Installer Assistant Certification Fee (One Year Certification - \$50.00) | \$ |
| Additional Endorsements (not including the first endorsement) _____ x \$25.00 | \$ |
| Total Fee Submitted: | \$ |

BACKGROUND CHECK:

All parties certified under this program will be required to under go a national criminal history check through the Federal Bureau of Investigation. A finger print card will be provided upon receipt of this application and the appropriate fees.

CHECK OFF LIST:

- Application, filled out completely.
- Copy of any documentation regarding disciplinary action taken against the licensee.
- Copy of any documentation which qualifies you to certify for an endorsement:
 - PE License
 - NICET Certificate
 - NBFAA Certificate
 - Documented Training by certified nurse call contractor employer
 - Nurse Call Manufacturer training
 - Master or Journeyman electrician, licensed by the State of Iowa Electrical Examining Board
 - Other as approved by the State Fire Marshal
- Fee for certification
- Signed application

I hereby certify that I am familiar with the Iowa statutes and administrative rules in regards to the Certification Program for Alarm System and that all statements made by me on this application are to the best of my knowledge true and correct. I understand that any false statements or material misrepresentations on this application may be cause for denial, suspension, or revocation of the certification.

Name _____ Title _____

Signature _____ Date _____

This completed application, fees and any supporting documentation should be submitted to the following address at least thirty (30) days in advance of bidding on work covered by Iowa Code 100C.7:

Iowa State Fire Marshal's Office
215 E 7th St.
Des Moines, IA 50319

For Office Use Only:

Application Form Ver. 3.1
Established 11/3/2008