Gerald R. Leach
Office of State Fire Marshal
45 Commerce Drive, Suite 1
52 State House Station
Augusta, Maine 04333-0052

207-626-3889 Phone 207-287-6251 Fax gerald.r.leach@maine.gov www.maine.gov/dps/fmo/home

Application / Renewal Form for Fire Sprinkler License with INSPECTOR Endorsement

		INSPECTOR	Elidorsement		
Complete this	form, then mail it to	the above address w	vith a check made ou	ut to "Treasurer, Stat	e of Maine".
	Initial License (\$	100)			
	Renewal or Reinstate	ed License (\$100)	My Current (d	or Expired) License ‡	‡ is:
Your license expire date for a renewal.		ay that it is issued fo	r initial & reinstated i	licenses or 2 years f	rom expiration
Your Name the	e way that you w	ant it to appear o	on your license:		
The address th	 nat you want you	ır license renewa	al letter mailed to) <i>:</i>	
Street or Po	Э <i>Вох:</i>				
Town:			State:	Zip:	
		where you can b			
Street:					
		_		Zip:	
Work Phone:		Fax:			
Cell Phone:		Home Phone:			
of a NICET sprinkler in	□ II or other nationspection.	of of working kno nally recognized posted to our w	l certification ach	nieved in the are	a of fire
•		ng info on our w			IL
☐ No-address ☐ No-work phone ☐ No-fax					
Please rem	ember to keep c	our office update	d of any change	s in contact infor	mation!
The area below is	to be filled in by the O	office of State Fire Mars	shal:		
Date Received	Fee Received	Check #	Date Issued	Expiration Date	Number Issued
	1]			·