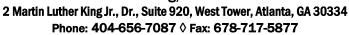


OFFICE OF INSURANCE AND SAFETY FIRE COMMISSIONER

COMMISSIONER OF INSURANCE • INDUSTRIAL LOAN COMMISSIONER • SAFETY FIRE COMMISSIONER

John F. King, Commissioner





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SPRINKLER CONTRACTOR'S CERTIFICATE OF COMPETENCY SITE SUPERVISION FORM

SAFETY FIRE ENGINEERING & INSPECTION GID-352-SF JUL2019

Use Separate Form For Each Job Site Visit

Facility Name:		
Project Name:		
Physical Address:		
City:	County:	_ Zip:
Sprinkler Contractor's Name (Print):		
Certificate of Competency's or Designee's Printed Name:		
Certificate of Competency's or Designee's Signature:		
Certificate of Competency's State License Number:		
Site Visit Number (1st, 2nd, 3rd, etc):		
Total Visits to Date:		
Date of Visit:		
Owner/Owner's Representative/General Contractor/ Representative's Name (Print):		
Company Name (Print):		
Signature:		
Type of System(s) (Wet, Dry, etc):		
NFPA Standards System(s) was designed by:		
Upon project completion, the Certificate of Competency Holder affirms the installation meets or exceeds all requirements of the Safety Fire Commissioner's Rules and Regulations 120-3-3. This shall be signed by the Certificate of Competency Holder, only.		
Certificate of Competency Holder's Signature:	_	Date: