

## Montana Fire Protection Licensure Program

301 S Park Avenue  
PO Box 200517  
Helena, MT 59620-0517  
Phone: (406) 841-2056 Fax: (406) 841-2050  
Email: [buildingcodes@mt.gov](mailto:buildingcodes@mt.gov)  
Website: [fireprotectionlicense.mt.gov](http://fireprotectionlicense.mt.gov)

### APPLICATION PROCEDURES FOR: INDIVIDUAL ENDORSMENT LICENSE

ILLEGIBLE AND INCOMPLETE APPLICATIONS WILL BE RETURNED.

**(Please allow 14 days for processing from the date that the department receives a complete application)**

In accordance with Section 50-39-101, MCA, a person or entity shall obtain a license before engaging in the business of servicing fire extinguishers or before engaging in the business of selling, servicing or installing fire alarm systems, special agent fire suppression systems, or fire extinguishing systems.

#### The following information is required in order for your application to be processed:

- 1) A complete application containing accurate information and all required information. The information provided must be legible and printed in ink or typewritten.

One of the following criteria must be met for endorsement licensure. Please submit a copy of one of the following with the application:

- A)
    1. Certification of completion of all the NICET work elements provided for under Section 24.144.502(b) A.R.M. or completion of NICET II;
    2. Certificate of completion for the Certified Fire Alarm Technician Level II (CFAT) from the Electronic Security Association's National Training School (fire alarm only).
  - B) Completion of a state approved apprenticeship program with the verification of completion sent to the licensing program at the above address directly from the approving bureau;
  - C) Completion of manufacturer training with the certificate sent to the licensing program at the above address directly from the manufacturer; or
  - D) Currently holds the equivalent endorsement in another jurisdiction provided that the applicant meets or exceeds the qualifications for endorsement in Montana, and verification of endorsement is sent to the licensing program at the above address directly from the other state, territory, or federal government.
- 2) Submit a \$25.00 one-time processing fee plus the following endorsement fee for **each** type of endorsement you are applying for.

Sell Service or Install Fire Alarm Systems:	\$100.00
Sell Service or Install Fire Extinguishing Systems:	\$100.00
Sell Service or Install Special Agent Fire Suppression Systems:	\$100.00

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APPLICATION FOR:

### INDIVIDUAL ENDORSMENT LICENSE

**License Fees:**

**\$25.00 application fee**

**\$100.00 per endorsement type**

Type of license endorsement applying for (check all that apply):

- Sell, service or install fire alarm systems
- Sell, service or install special agent fire suppression systems
- Sell, service or install fire-extinguishing systems

Please indicate below, and submit one of the following with this application:

- Verification of completion of an approved apprenticeship program directly from the sponsor of the program
- Verification of completion of the work elements of the NICET level II or ESA Certified Fire Alarm Tech LvL II (CFAT2)
- Verification of manufacturer training directly from the manufacturer (Cannot be used for Fire-Extinguishing Systems).

**\*\*\* NICET Certificates for Inspection & Testing of Water-Based Systems does not meet the qualifications for licensure for the fire extinguishing systems endorsement \*\*\***

Social Security Number \_\_\_\_\_

Full Name \_\_\_\_\_  
Last First Middle

Other Name(s) Known By \_\_\_\_\_

Gender \_\_\_\_\_ Date of Birth \_\_\_\_\_ Foreign ID Number \_\_\_\_\_

E-mail Address \_\_\_\_\_

Please indicate your preferred mailing address

\_\_\_ Home

\_\_\_ Business

Applicant Residential Information

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Address \_\_\_\_\_

Zip Code \_\_\_\_\_

City, State \_\_\_\_\_

Applicant Employer Information (licensed business entity)

Business Name \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Address \_\_\_\_\_

City, State \_\_\_\_\_

Zip \_\_\_\_\_

License Number: \_\_\_\_\_

**All applicants must answer the following questions. If you answer yes, give specific details (names of organizations, dates, reasons, and outcome) on a separate sheet of paper.**

1. Have you ever applied for a Montana fire licensure? If yes, attach a detailed explanation.  Yes  No
2. Have you ever applied for a fire licensure in any other state? If yes, attach a detailed explanation giving name of state, date applied for and results.  Yes  No
3. Have you ever been denied the right to hold a fire licensure in any state? If yes, attach a detailed explanation.  Yes  No
4. Has a licensing agency ever taken adverse or disciplinary action against your license (certificate)? If yes, attach a detailed explanation.  Yes  No
5. Have you license (certificate) ever been forfeited or surrendered? If yes, attach a detailed explanation.  Yes  No
6. Has a complaint ever been made against you alleging unethical behavior or unprofessional conduct? If yes, attach a detailed explanation.  Yes  No
7. Has any legal or disciplinary action been filed against you which relates to The propriety or fitness to practice this profession? If yes, attach a detailed explanation.  Yes  No
8. Have you ever been expelled from or asked to resign from any professional organization or been censured by a professional organization of which you were a member? If yes, attach a detailed explanation.  Yes  No
9. Have you ever been charged with or convicted of a crime (including a plea of no contest or deferred prosecution) relating to, or committed during the course of your professional practice, involving violence, use or sale of drugs, fraud, deceit, or theft, whether or not an appeal is pending? You may omit: (1) traffic violations for which you paid a fine of \$100.00 or less and (2) charges or convictions prior to your 16th birthday. If yes, attach a detailed explanation.  Yes  No
10. Have you ever been charged with fraud, formally or informally, in any civil proceeding?  Yes  No
11. Do you have any physical or mental condition, which has in the past three years adversely affected your ability to practice this profession, including but not limited to, a contagious or infectious disease involving serious risk to the public? If yes, attach a detailed explanation.  Yes  No
12. Have you, within the last three years, used alcohol or any other mood-altering substance in a manner, which adversely affected your ability to practice this profession? If yes, attach a detailed explanation  Yes  No
13. Do you currently hold a fire license in Montana or another state? If yes, provide the following information: (Attach a supplement sheet if necessary).  Yes  No

List licenses from other jurisdictions:

State/Province/ Territory	License Number	Date Issued	Is it Current	Class/Type License

### AFFIDAVIT

I authorize the release of information concerning my education, training, record, character, license history and competence to practice, by anyone who might possess such information, to the Montana Board of Fire Prevention Licensing.

I hereby declare under penalty of perjury the information included in my application to be true and complete to the best of my knowledge. In signing this application, I am aware that a false statement or evasive answer to any question may lead to denial of my application or subsequent revocation of licensure on ethical grounds. I have read and am familiar with the applicable licensure laws of the State of Montana and instructions to applicants for licensing. I accept the rules and procedures outlined in these documents as the basis for my application.

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Legal Signature of Applicant

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Date

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Printed Name of Applicant