



STATE OF UTAH APPLICATION FOR CERTIFICATE OF REGISTRATION FIRE ALARM SYSTEM INSPECTION & TESTING

A Criminal History Record must accompany this application

BCI's website is bci.utah.gov

Revised 01/18/2019

Type of Application <input type="checkbox"/> New <input type="checkbox"/> Renewal	Original Date: _____ AE No: _____
Applicant's Name _____ <div style="text-align: center; font-size: small;">First Middle Last</div>	
Home Address _____ <div style="text-align: center; font-size: small;">Street or PO Box</div>	
City State Zip Code E-mail Address	
Telephone: _____ E-mail Address: _____	
Date of Birth: _____ Age: _____ Sex: <input type="checkbox"/> M <input type="checkbox"/> F Color of Eyes: _____	
Weight: _____ lbs Height: _____ ft _____ in Color of Hair: _____	

Name of Firm _____ Mailing Address _____ <div style="text-align: center; font-size: small;">Street or PO Box</div>
_____ <div style="text-align: center; font-size: small;">City State Zip Code Telephone Number</div>

Have you ever been convicted of any crime? Yes No
 If "yes," indicate the date, type and location of the offense, the arresting agency, and the court disposition and sentencing information. (Use back of application) Have you lived in another State within the last five years? Yes No ***If 'Yes', list any/all states:**

READ THE FOLLOWING PARAGRAPH CAREFULLY BEFORE SIGNING THIS APPLICATION:
 I affirm that this application contains no misrepresentation or falsification and the information is true and complete to the best of my knowledge and belief. I hereby understand and agree that a criminal history background check will be conducted on me and the information will only be used by the State Fire Marshal's Office to meet the requirements of Utah Administrative Code R710-11-7.2. I also understand and agree that failure to conduct business according to the adopted statutes and administrative rules of the State of Utah with regard to fire alarm inspection and testing will subject myself to the possibility of the loss of my license and/or the possibility of criminal prosecution.

Signature _____	Date _____
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<input type="checkbox"/> Certificate of Registration <input type="checkbox"/> Basic Fire Alarm Technician <input type="checkbox"/> Fire Alarm Technician <input type="checkbox"/> Master Fire Alarm Technician	\$40.00		BCI Approved: Date: _____ By: _____ <i>Approved Yes No</i>
<input type="checkbox"/> Examination Fees	\$30.00		
<input type="checkbox"/> Renewal of Alarm System Certificate of Registration	\$40.00		
Total			

MAIL TO: UTAH STATE FIRE MARSHAL, 410 W. 9800 S., 3RD FLOOR, SANDY, UT 84070

Original Date		Renewal Date		Renewal Date		Renewal Date		Renewal Date	
Date Paid		Date Paid		Date Paid		Date Paid		Date Paid	
Amount Paid		Amount Paid		Amount Paid		Amount Paid		Amount Paid	
Receipt #		Receipt #		Receipt #		Receipt #		Receipt #	
Date cert sent		Date cert sent		Date cert sent		Date cert sent		Date cert sent	