



Colorado Department of Public Safety
Division of Fire Prevention and Control
 700 Kipling Street, Suite 4100
 Lakewood, CO 80215
 (303)239-4100 phone (303) 239-4131 fax
 cdps_dfpc_construction@state.co.us
<http://dfpc.state.co.us>



APPLICATION FOR QUALIFIED TRADESPERSON

APPLICANT INFORMATION (please print)

Applicant Name:			
Employer Name:			
Mailing Address:			
City:	State:	Zip code:	
Telephone number: () -		Fax number: () -	
E-mail:			

ICC CERTIFICATION INFORMATION

If you are certified by the International Code Council (ICC), enter the information requested.

Commercial Inspector Certification Categories	Certification Number	Date Obtained	Expiration Date
Commercial Building Inspector			
Commercial Mechanical Inspector			
Commercial Combination Inspector			
Specify Other Certification Categories	Certification Number	Date Obtained	Expiration Date

OTHER STATE OR NATIONAL ORGANIZATION CREDENTIAL INFORMATION

If you have credentials from state or national organizations (not ICC), enter the information requested.

Name of Organization	Credential Type	Credential Number	Date Obtained	Expiration Date

EDUCATION AND TRAINING

In lieu of appropriate ICC certification or other national organization credentials or certifications, education and experience may be evaluated to meet certification requirements. Applicants shall have at least five years of demonstrated education, training, and experience in commercial building construction trades. Qualified tradesperson's qualifications shall be considered valid for the duration of the permit. Check all boxes below that apply.

High School College Degree awarded— specify

Experience in commercial building construction inspections, which required the ability to effectively read and interpret building plans and specifications.

Experience as a commercial building plans examiner reviewing plans for code compliance.

Registered architect or professional engineer. Field of Specialty:

Registration Type: _____ Registration Number: _____

Issued by State of: _____ Expiration Date: _____

Are continuing education credits required to maintain registration?: Yes or No

EMPLOYMENT HISTORY AND EXPERIENCE

List your experience beginning with your present position. Describe your duties and experience related to commercial building construction projects, list areas of expertise related to occupancy types, etc. At least five years of commercial building construction experience needs to be demonstrated. Attach additional sheets if necessary.

Employer name: Address: _____ City _____ State _____ Phone: () - _____ ext. _____ Period of employment: From: _____ To: _____ Hours worked per week: _____ Position/Title: _____ Describe work performed: _____	Employer name: Address: _____ City _____ State _____ Phone: () - _____ ext. _____ Period of employment: From: _____ To: _____ Hours worked per week: _____ Position/Title: _____ Describe work performed: _____
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I certify all statements are true to the best of my knowledge and that all work shall be performed in accordance with the regulations adopted by the Division of Fire Safety (8 CCR 1507-30).

I authorize the Division of Fire Safety to post my certification on the Division's website.

Applicant Name:	Date:
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DFS USE ONLY

Date Reviewed	Reviewed by:	<input type="checkbox"/> Approved <input type="checkbox"/> Denied	Certification #	Issue Date	Expiry Date
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