



TEXAS DEPARTMENT OF INSURANCE

State Fire Marshal's Office (112-FM)

333 Guadalupe, Austin, Texas 78701 * PO Box 149221, Austin, Texas 78714-9221
(512) 676-6800 | F: (512) 490-1063 | (800) 578-4677 | TDI.texas.gov | @TXSFMO

FIRE SPRINKLER RESPONSIBLE MANAGING EMPLOYEE (RME) LICENSE APPLICATION

This application must be accompanied by all documents and information required by Chapter 6003 of the Texas Insurance Code and the Fire Sprinkler Rules, **AND THE ORIGINAL SCORE REPORT RECEIVED FROM THE TEST ADMINISTRATOR SHOWING A PASSING SCORE FOR THE REQUIRED EXAMS.** Please note that test scores are valid for one year from the date the test was taken.

Complete answers must be given to all questions. Please print or type. Any fraudulent representation on this application may be cause for denial, suspension, or revocation of a license. All fees are non-refundable, except for overpayments resulting from mistakes of law or fact.

LICENSE						
CHECK ONE	TYPE OF LICENSE	LICENSE FEE	CODE			
<input type="checkbox"/>	Responsible Managing Employee – General	\$200	573-03			
<input type="checkbox"/>	Responsible Managing Employee – Dwelling	\$150	573-08			
<input type="checkbox"/>	Responsible Managing Employee – Underground Fire Main	\$150	573-10			
<input type="checkbox"/>	Responsible Managing Employee – Inspector	\$ 50	573-11			

DO NOT SUBMIT THIS APPLICATION UNTIL ALL TEST REQUIREMENTS HAVE BEEN MET

APPLICANT						
LAST NAME		FIRST NAME AND MIDDLE NAME			HOME AREA CODE AND TELEPHONE	
HOME ADDRESS		CITY	STATE	ZIP CODE	COUNTY	
MAILING ADDRESS		CITY	STATE	ZIP CODE		
DRIVER'S LICENSE NUMBER AND STATE		E-MAIL ADDRESS FOR NOTIFICATION PURPOSES (<i>optional</i>)				
SOCIAL SECURITY NUMBER		(Disclosure of Social Security Number is required by the Texas Family Code §231.302 and will be used pursuant to that code.)				
WEIGHT	HEIGHT	SEX	COLOR OF HAIR	COLOR OF EYES	DATE OF BIRTH	

APPLICANT'S EMPLOYER						
NAME OF FIRM				AREA CODE AND TELEPHONE		
FIRE SPRINKLER CERTIFICATE OF REGISTRATION NUMBER (OR "NEW APPLICATION PENDING")				DATE OF HIRE	COUNTY	
SCR-						
ADDRESS OF FIRM				CITY	STATE	ZIP CODE

QUESTIONS					
1	Have you completed National Institute for Certification in Engineering Technologies (NICET) examination requirements for certification at Level II or Level III for fire protection automatic sprinkler systems layout? If yes, attach a copy of NICET's notification letter confirming successful completion.	YES Level II <input type="checkbox"/>	YES Level III <input type="checkbox"/>	NO <input type="checkbox"/>	
2	Have you completed National Institute for Certification in Engineering Technologies (NICET) examination requirements for certification at Level II for Inspection and Testing of Water-Based Systems? If yes, attach a copy of NICET's notification letter confirming successful completion.	YES Level II <input type="checkbox"/>	NO <input type="checkbox"/>		

QUESTIONS (cont)			
3	Are you a professional engineer registered in Texas? If yes, attach current proof of registration.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
4	Do you hold a current license issued by the Texas State Fire Marshal? If yes, print license number(s) here.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
5	Have you ever held a license issued by the Texas State Fire Marshal that is not shown in question 3 above?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
6	Have you ever had a permit or license denied, suspended, or revoked? If yes, give details on a separate sheet and attach it to this application.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
7	Have you ever been convicted of a misdemeanor or a felony (including any deferred adjudication)? If yes, give details on a separate sheet and attach it to this application.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Federal Bureau of Investigation (FBI) BACKGROUND PROCESS			
An FBI Background is required through IdentoGO and requires a unique service code that will be needed when scheduling for submission of your electronic fingerprints. Email FMLicensing@tdi.texas.gov with the following information in order to obtain the service code and procedures: First Name, Last Name, current mailing address and the type of license you will be applying for.			
SIGNATURES			
In applying for a fire sprinkler license, I certify that I will comply with Chapter 6003 of the Texas Insurance Code and the Fire Sprinkler Rules. By my signature, I verify that the information on the application and its attachments are true. I understand that knowingly providing a false answer to any question or submitting false information or documents with this application may be tampering with a governmental record which is punishable under the Texas Penal Code Chapter 37, §37.10.			
SIGNATURE OF INDIVIDUAL APPLICANT			DATE
<p>I certify that this applicant will be a <input type="checkbox"/> full-time <input type="checkbox"/> part-time employee of the firm, covered by the general liability insurance policy of the firm shown on this application and upon receipt of a license is designated to represent this firm, subject to Chapter 6003 of the Texas Insurance Code and the Fire Sprinkler Rules.</p> <p>We know of no reason why the applicant should be denied a license. By my signature, I verify that the information on this application and its attachments are true. I understand that knowingly providing a false answer to any question or submitting false information or documents with this application may be tampering with a governmental record which is punishable under the Texas Penal Code Chapter 37, §37.10.</p>			
SIGNATURE OF AUTHORIZED REPRESENTATIVE OF FIRM			DATE
PRINTED NAME			TITLE

Check or money order should be made payable to the Texas Department of Insurance.
Mail this completed application along with appropriate fee and any additional documents to:

Mailing Address:	State Fire Marshal's Office Mail Code 9999 P. O. Box 149221 Austin, TX 78714-9221 (512) 676-6809	Physical Address:	State Fire Marshal's Office 333 Guadalupe Austin, TX 78701 (512) 490-1056 www.tdi.texas.gov/fire
		Fax No.	
		Web Site Address:	

NOTICE ABOUT CERTAIN INFORMATION LAWS AND PRACTICES

With few exceptions, you are entitled to be informed about the information that the Texas Department of Insurance (TDI) collects about you. Under sections 552.021 and 552.023 of the Texas Government Code, you have a right to review or receive copies of information about yourself, including private information. However, TDI may withhold information for reasons other than to protect your right to privacy. Under section 559.004 of the Texas Government Code, you are entitled to request that TDI correct information that TDI has about you that is incorrect. For more information about the procedure and costs for obtaining information from TDI or about the procedure for correcting information kept by TDI, please contact the Agency Counsel Section of TDI's General Counsel Division at (512) 676-6551 or visit the Corrections Procedure section of TDI's website at www.tdi.texas.gov.