



## TEXAS DEPARTMENT OF INSURANCE

### State Fire Marshal's Office (112-FM)

333 Guadalupe Street, Austin, Texas 78701 ★ PO Box 12107, Austin, Texas 78711  
 (512) 676-6800 | F: (512) 490-1056 | TDI.texas.gov/fire | @TXSFMO

## Application to Revise or Transfer All Types of Fire Sprinkler Licenses

- Use this form to:
  - Request a copy of a license.
  - Change your home and mailing address.
  - Transfer a license to a different registered company.
  - Add license to another registered company.
- Please print or type your answers.
- All fees are nonrefundable, except for overpayments from mistakes of law or fact.
- Send only one payment to cover all fees. Fee payments for various applications need to be combined.
- Answer questions completely and truthfully. We may deny, suspend, or revoke your license if you misrepresent or knowingly give wrong information on this application.

### 1. Licensee information (Use your full name as it appears on your driver's license)

First name	Middle name	Last name	Suffix
Phone (required)	SFMO license number	Effective date of change	
Email (required)	*Social Security number (required)		

\* The disclosure of your Social Security number is required by the Texas Family Code, Section 231.302 and will be used pursuant to that code.

## ► Type of requested change

**Fee: \$35** (TDI code 573)

Check all that apply. Pay only one fee no matter how many transactions are checked on this form.

- Request a duplicate copy of a license – complete sections 1, 2, & 5.
- Change home and mailing address – complete sections 1, 2, & 5.
- Transfer from one company to another – complete sections 1, 2, 3, 5, & 6.
- Add license to another registered company – complete sections 1, 2, 4, 5, & 6.

## 2. Home and mailing address (required for all sections)

Home address	City	State	ZIP	County
Mailing address	City	State	ZIP	County

## 3. Company transfer information

- Check the box to transfer your license from all registered companies SFMO has on file.

or

List the name of the company you are transferring your license from.

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Enter the name of the company you are transferring to and the SCR number.

Company name

**SCR-**

Fire sprinkler certificate of registration number (if a new company application, indicate "pending")

#### 4. Add your license to another registered company.

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Company name

**SCR-**

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Fire sprinkler certificate of registration number (if a new company application, indicate "pending")

#### 5. Applicant signature (required)

I verify that all information above is correct.

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Applicant signature

Date

#### 6. Company authorization (required for sections 3 and 4)

- I authorize the Texas State Fire Marshal or its representative to enter, examine, and inspect any premises, building, room, or establishment used by the company while engaged in the business to determine compliance with Chapter 6003 of the Texas Insurance Code and Section 34.700 of Texas Administrative Code, Title 28, the Fire Sprinkler Rules.
  - I am familiar with and will comply with Chapter 6003 of the Texas Insurance Code and Section 34.700 of Texas Administrative Code, Title 28, the Fire Sprinkler Rules.
  - 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, Section 37.10.
- ▶ Will this applicant be the company's listed designated full-time RME employee?  
 Yes       No

**Note:** The designated full-time RME employee cannot be an RME-I applicant.

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**Company authorized representative signature**

Date

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Print name

Title

## 7. Payment

Pay by check or money order payable to the Texas Department of Insurance. Mail your completed application, additional documents, and payment to:

**Mailing address**

State Fire Marshal's Office  
P.O. Box 12107  
Austin, Texas 78711-2107

**Street address**

State Fire Marshal's Office  
333 Guadalupe St.  
Austin, Texas 78701

**Your rights:** You can request information we have about you by emailing [OpenRecords@tdi.texas.gov](mailto:OpenRecords@tdi.texas.gov) or writing to: Public Information Coordinator, Texas Department of Insurance, PO Box 12030 (mail code 112-1C) Austin, Texas 78711-2030. You also have the right to ask that we fix information we have about you that is wrong. To ask for a correction, send (1) your name, mailing address, and your phone number, (2) details about what needs to be fixed, and (3) the reason or proof showing why the information is wrong. Send this by email to [RecordCorrections@tdi.texas.gov](mailto:RecordCorrections@tdi.texas.gov) or by mail to: Record Correction Request, Texas Department of Insurance, PO Box 12030 (mail code 113-1C), Austin, Texas 78711-2030. There is a different process to change or update information you submitted to the State Fire Marshal's Office (SFMO). To update information submitted to SFMO, email [FMLicensing@tdi.texas.gov](mailto:FMLicensing@tdi.texas.gov). There may be a fee to update information held by SFMO.