



FIRE PROTECTION BUREAU
EDUCATION, ENFORCEMENT, AND ANALYTICS SECTION
PO Box 42642
Olympia WA 98504-2642
(360) 596-3946 FAX: (360) 596-3934
E-Mail: firesprinkler@wsp.wa.gov



THIS PACKET IS ONLY FOR THOSE
SEEKING TO:

**REINSTATE THEIR QUALIFIED
EXEMPT CERTIFICATE OF
COMPETENCY**

PER RCW 18.160 – THE FIRE SPRINKLER
SYSTEM CONTRACTORS LAW

BOTH YOU AND YOUR EMPLOYER MUST MEET THE CRITERIA
OF BEING EXEMPT FROM THE ABOVE-REFERENCED
CONTRACTOR LICENSING LAW.

PLEASE READ ALL ASSOCIATED INSTRUCTIONS



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Please read all of these instructions carefully. Incomplete and/or illegible documentation may delay our ability to process an application and can result in immediate denial/rejection. ANY missing or incomplete information and/or refund we must process on your behalf must be completed BEFORE anything can be issued, delaying the process.

To **reinstate a QUALIFIED EXEMPT Certificate of Competency**, you will need to:

- 1) Be sure that neither you nor your employer, in any way, shape, and/or form, can be considered a fire protection sprinkler system contractor. Both you and your employer must be considered exempt from the Fire Protection Sprinkler System Contractors Law for you to be issued a QUALIFIED EXEMPT certification.
- 2) Have contacted the Washington State Patrol Fire Protection Bureau and been instructed and approved to complete this form. **If you have not been approved to use this form, it will be rejected.**
 - a. The three reasons this form would be approved and thereby accepted:
 - i. Missed Renewal: Your renewal window has been closed.
 - ii. Previously Certified: You have been uncertified for less than two (2) program years.
 - iii. Restoring a Certification: You have been uncertified for more than two (2) program years and must include the QUALIFIED EXEMPT initial application with this reinstatement form.
- 3) Include a letter explaining the nature of your employment and how you both are CURRENTLY considered exempt from the licensing law and why you need this credentialing. The exemptions listed in [RCW 18.160](#) and [WAC 212-80](#) are merely indicative, not all inclusive, so each application will be evaluated on a case-by-case basis. When Restoring a Certification, you need only draft and submit this letter once.
- 4) Unless otherwise notified by this office, DO NOT SUBMIT any fees initially. You will be billed once the application has been deemed complete, valid, and legal using the fee submittal form you will complete as part of this application.
- 5) Leave NOTHING blank in this application. Use “NOT APPLICABLE,” “DOES NOT APPLY,” or other similar mark. You are also responsible for accurately recording your employer’s full (licensing) name.
- 6) Print legibly, complete electronically, or have it typed. If it cannot be read, it **CAN BE REJECTED.**
- 7) Return ALL portions of this document marked “MUST RETURN AS PART OF THE APPLICATION.” Unless otherwise instructed, partial or incomplete submissions – on any level – WILL be discarded.
- 8) Include a copy of a government-issued photo identification that possesses a sample of your signature.
- 9) Submit the completed application in its entirety to:
Fire Protection Bureau Education, Enforcement, and Analytics Section at Post Office Box 42642 in Olympia, WA 98504-2642.
- 10) A completed and otherwise legal to issue application can take between two (2) and ten (10) working days to process and issue, depending on the circumstances.

INCOMPLETE/ILLEGIBLE SUBMISSIONS WILL BE DELAYED OR SUMMARILY REJECTED

REINSTATING A QUALIFIED EXEMPT CERTIFICATION



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Date Received

REINSTATEMENT FORM: QUALIFIED EXEMPT CERTIFICATION

***ONLY** for use by a previously certified QUALIFIED EXEMPT Certificate of Competency Holder seeking reinstatement who has been instructed to do so by this office. ALL others will be rejected.*

Certification Level: Level 1 Level 2 Level 3 Level U Level ITT

Year of Expiration: _____ Date Instructed to Use Form: _____

Complete Name of Certificate Holder:	_____
Certification Number:	_____ (as issued by this office)
Complete Mailing Address:	_____ _____
Phone Number:	_____
FAX Number:	_____
E-Mail Address:	_____
Name of Exempt Employer:	_____

Since I was last certified, I have been arrested, charged, indicted, and/or convicted of a criminal violation.

Year	Charge	Disposition

RCW 18.160.080 makes felony conviction a potential hindrance to certification. However, each application will be evaluated individually without bias.

Neither me nor my employer act as or are considered a Fire Protection Sprinkler System Contractor.

I, the applicant for a QUALIFIED EXEMPT certification reinstatement, hereby swear and attest that I am still considered exempt from RCW 18.160 and/or WAC 212-80, whether by language or intent. Though not employed either directly or indirectly by the sprinkler industry/trade this certification is necessary through obligations beyond RCW 18.160 or WAC 212-80 for me to demonstrate my competency and ability. I understand that by making this application I am agreeing to be compliant with RCW 18.160 and WAC 212-80 but will ONLY use this certification while truly exempt.

Printed Name of Certificate Holder

Signature of Certificate Holder

Date of Signature

REINSTATING A QUALIFIED EXEMPT CERTIFICATION



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VERIFICATION OF EMPLOYMENT FOR A QUALIFIED EXEMPT CERTIFICATE OF COMPETENCY HOLDER

Name of Applicant/Employee:	_____		
Name of Exempt Employer:	_____		
Signatory Name:	_____	Phone Number:	_____
E-Mail Address:	_____		

I, the signatory for the above-referenced employer, hereby swear and attest that neither the above-referenced individual nor our agency/organization are working as a fire protection sprinkler system contractor. We have both read [RCW 18.160](#) and [WAC 212-80](#) and understand that they ONLY apply to fire protection sprinkler system contracting companies and their employees while engaged in the sprinkler contracting trade.

This definition does not fit our organization or this individual's employment and any performance of work normally considered a part of the sprinkler trade/industry is merely incidental to the individual's normal work duties. Both of us meet the criteria of exemption from RCW 18.160 and WAC 212-80 – whether by language alone or by intent.

I verify that I am authorized by the above-referenced employer to make this statement on their behalf and further hereby make myself available to the Washington State Patrol Fire Protection Bureau and the Education, Enforcement, and Analytics Section to answer any questions regarding this candidate for QUALIFIED EXEMPT certification and/or the nature of our exemption from RCW 18.160 and WAC 212-80.

Printed Name of the Employer's Signatory

Position with Agency/Organization of Signatory

Signature of the Employer's Signatory

Date of Signature, Consent, and Application

Subscribed and sworn before me this the _____ day of _____ of the calendar
date full month
 year _____ in the city and county of _____ .
four digit year city, county

Signature of Notary Public

Date Signature was Witnessed

Printed name and contact information of the notary public

Seal of the Notary Public

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FEE SUBMITTAL: QUALIFIED EXEMPT REINSTATEMENT

Name of Certification Applicant:	_____
Employer:	_____

- 1) Complete the above portion of this form and submit it as part of your application. Unless instructed otherwise, DO NOT include any fees with your initial submission.
 - a. When completing both the reinstatement paperwork and an initial application form, return both fee submittal forms. ONLY one will be returned to you for payment.
- 2) Once approved for reinstatement, this form is returned to you with the amount due calculated by our office. This document is not valid unless signed by an employee of the Fire Protection Bureau.
- 3) Based upon the application's completion date and projected processing times, we try to offer two options for your month of reinstatement. Each quote is for the remainder of the year, as set by month, and has a payment due date. Payments **MUST BE RECEIVED** by your chosen Quote's due date to be reinstated as of that month and any applications still pending after the due date noted in Quote 2 will be rejected.
 - a. Reinstatement fees are fixed, so in most cases, you will be given a single option, due date, and cost, which would be the full annual certification fee of \$50.00. This is determined in the review noted in bullet 2).
- 4) Checks are written out to the Washington State Patrol Fire Protection Bureau (WSP FPB).
- 5) A fee submittal form **MUST** be returned with your payment. Failure to do so or submitting a partial or incomplete payment will result in your payment being rejected.
- 6) The reinstated certification will be issued within ten (10) working days of receiving the payment.

REINSTATING A QUALIFIED EXEMPT CERTIFICATION

<u>Quote 1 (Target)</u>		<u>Quote 2 (No Later Than)</u>	
Month:	<input type="text"/>	Month:	<input type="text"/>
Amount Due:	<input type="text"/>	Amount Due:	<input type="text"/>
Due Date:	<input type="text"/>	Due Date:	<input type="text"/>
_____ Printed Name of WSP FPB Staff Member		_____ Signature of WSP FPB Staff Member	
		_____ Date of Signature	