



RESIDENTIAL OR JOURNEY LEVEL FITTER REINSTATEMENT

Read ALL instructions below carefully. Incomplete, illegible, or missing information will delay processing and may result in rejection. To reinstate a **Residential or Journey Level Fitter** certification with the state of Washington you will need to:

- 1) Have been previously certified as a Residential or Journey Level Fire Sprinkler Fitter within the previous two (2) calendar years. Individuals uncertified (expired) for greater than two (2) calendar years must reapply using the initial application form.
 - a. Trainee Level Fitters need only complete the application form noting their previous status.
- 2) Have contacted the Washington State Fire Marshal's Office 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 accepted are:
 - i. Missed Renewal: The biennial renewal cycle has closed.
 - ii. Previously Certified: You have been uncertified for less than two (2) calendar years.
 - iii. Instructed: You have been instructed by this office specifically to complete this form.
- 3) **You MUST include a copy of a valid government-issued photo identification that possesses a representative sample of your signature.**
- 4) DO NOT INCLUDE any fees with this application. Once your application has been accepted and your certification approved for issuance you will be billed for the amount due using the fee submittal form you will complete as part of this application.
 - a. A Late/Reinstatement Fee of \$ 100.00 may be assessed after one hundred and twenty (120) days of expiration.
- 5) Complete all sections of this application. Write "NOT APPLICABLE", "DOES NOT APPLY", or other clarifying statements as needed.
 - a. You are responsible for providing complete and accurate responses, such as your employer's full licensing name.
- 6) Return all portions of this completed application marked "MUST RETURN AS PART OF THE APPLICATION" at the bottom right of the page to:

USPS
WSP FPB EEA
Post Office Box 42642
Olympia, WA 98504-2642

E-Mail (Preferred)
firesprinkler@wsp.wa.gov

- 7) You must pass the certification examination in order to be reinstated as a Residential or Journey Level Fitter. You will not be scheduled for the test until your application is approved.
- 8) Within two (2) to ten (10) working days of passing the test, you will be provided the completed fee submittal form with the amount and date due. Your payment must be received by this due date with the completed fee submittal form in order to be accepted and the certification issued.
- 9) Certifications are only issued/valid upon receipt of the payment and are mailed out to the address provided in this application within two (2) to ten (10) working days of receiving payment.



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



Date Received

REINSTATEMENT FORM: FITTER CERTIFICATION

ONLY for use by previously certified Residential or Journey Level Fitters seeking to reinstate their certification under RCW 18.270. You must have been uncertified for less than two (2) calendar years and instructed by this office to use this form. ALL others will be rejected.

Expired Trainee Level Fitters should complete the Initial Trainee Fitter Application Form.

Certification Level: Journey Residential

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

Applicant Full Name:	_____
Complete Mailing Address:	_____ _____
Phone Number:	_____
FAX Number:	_____
E-Mail Address:	_____
Previous Certification Number:	_____ <i>(as issued by this office)</i>
Company You Work For:	_____

Trade Organization Affiliation(s)

Name and State of Organization	Position/Rank with Organization	Time Frame In Calendar Years

By submitting for the reinstatement of my fitter certification under RCW 18.270, I hereby verify knowledge and understanding of RCW 18.270 and WAC 212-90. I will comply with both and all associated laws, rules, codes, standards, and requirements of the Local Fire Code Authority while engaged in the Fire Sprinkler Fitting Trade to the best of my ability.

Printed Name of Certificate Holder

Signature of Certificate Holder

Date of Signature

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FEE SUBMITTAL: FITTER CERTIFICATION REINSTATEMENT

APPLICANT DETAILS:

Name of Certification Applicant: _____

Employing Contractor: _____

INSTRUCTIONS:

- 1) Complete the above portion of this form and submit it with your application.
- 2) Include ALL forms marked "MUST RETURN AS PART OF THE APPLICATION". Unless otherwise instructed, partial or incomplete submissions – on any level – WILL NOT be accepted and may be discarded.
- 3) Once this application is received, accepted, and approved for issuance, this form is completed (below) by this office and returned to you for payment.
 - a. If an examination is required, it must be successfully passed BEFORE the application will be approved for issuance.
- 4) Payment must be submitted physically by check or money order.
- 5) Checks and Money Orders are to be written out to the Washington State Patrol Fire Protection Bureau (WSP FPB).
- 6) Your payment MUST be submitted to this office with this form and received ON OR BEFORE the due date listed below. Failure to do so or submitting a partial or incomplete payment will result in your payment being rejected.

FOR WSP USE ONLY

Current Biennial Certification Cycle: _____

Submit the Total Due by Check or Money Order WITH THIS FORM on or before the Due Date to:

Biennial Cycle Fee: _____

Reinstatement Fee: _____

Total Due: _____

Due Date: _____

WSP FPB EEA
 Post Office Box 42642
 Olympia, WA 98504-2642

Printed Name of WSP FPB Staff Member

Signature of WSP FPB Staff Member

Date of Signature

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