Public School Construction Program 700 Kipling St, Ste 4100 Lakewood, CO 80215 (303)239-4100 phone (303) 239-4131 fax *cdps_dfpc_construction@state.co.us* https://dfpc.colorado.gov/FLSconstruction



COLORADO

Division of Fire Prevention & Control

Department of Public Safety

INDIVIDUAL APPLICANT INFORMATION FOR PREQUALIFIED BUILDING DEPARTMENTS

(PLEASE COMPLETE THIS FORM FOR EACH APPLICANT LIST	TED ON PAGE 1	OF THE	LOCAL JUR			LICATION)	
APPLICANT NAME:							
EMPLOYER NAME:							
MAILING ADDRESS:							
CITY: STATE:			ZI	P CODE:			
TELEPHONE NUMBER:	FAX NUMBE	R:					
E-MAIL:							
CERTIFICATIONS REQUE	STED (CHECK A	LL THAT	APPLY)		_		
PLAN EXAMINER		BUILD	ING INSPEC	TOR]		
CERTIFICATIO	ON INFORMATI	ON					
IF YOU ARE CERTIFIED BY THE INTERNATIONAL COD	E COUNCIL (ICC), ENTER	THE INFOR	MATION RE	QUE	STED.	
COMMERCIAL INSPECTOR CERTIFICATION CATEGORIES	CERTIFICATIO	N	DATE OBTAINED		EXPIRATION		
	NUMBER				DATE		
COMMERCIAL BUILDING INSPECTOR / BUILDING INSPECTOR							
COMMERCIAL MECHANICAL INSPECTOR							
COMMERCIAL COMBINATION INSPECTOR							
GENERAL PLANS EXAMINER CERTIFICATION CATEGORIES						EXPIRATION	
(APPLIES ONLY FOR LOCAL JURISDICTION APPLICANTS)	NUMBER				DATE		
BUILDING PLANS EXAMINER							
MECHANICAL PLANS EXAMINER							
SPECIFY OTHER CERTIFICATION CATEGORIES ,INCLUDING	CREDENTIAL	CERTIE		DATE		EXPIRATION	
OTHER STATE OR NATIONAL ORGANIZATIONS	TYPE	CERTIFICATION NUMBER		OBTAINED		DATE	
			_	00174112		27112	
FDUCATION	AND TRAINING	G		<u> </u>			
IN LIEU OF APPROPRIATE ICC CERTIFICATION OR OTHE			TION CRE	DENTIAL S	OR		
CERTIFICATIONS, EDUCATION AND EXPERIENCE MAY BE						EMENTS.	
APPLICANTS SHALL HAVE AT LEAST FIVE YEARS OF DE					-		
IN BUILDING PLAN REVIEW OR INSPECTIONS. INSPECTO	OR CERTIFICAT	IONS ISS	UED ON TH	HE BASIS (DF		
EDUCATION AND EXPERIENCE WILL BE VALID FOR ONE	YEAR, AND WI	LL REQU	IRE THE A	PPLICANT	то	OBTAIN	
NATIONAL CERTIFICATION PRIOR TO DFS RENEWAL OF	THE CERTIFIC	ATION.					
CHECK ALL BOXES	BELOW THAT A	APPLY.					
HIGH SCHOOL COLLEGE DEGREE AWAR	DED- SPECIFY	<u></u>					
EXPERIENCE IN BUILDING CONSTRUCTION, WHICH RE	QUIRED THE A	<u>ΒΙΓΙ Γ</u> Υ Τ	U EFFECT	IVELY REA	AD AI	UV	
INTERPRET BUILDING PLANS AND SPECIFICATIONS.							
EXPERIENCE AS A BUILDING PLANS EXAMINER REVIE			COMPLIA	NUE.			
		TV .					
REGISTERED ARCHITECT OR PROFESSIONAL ENGINEER. F	EGISTRATION NU						
	XPIRATION DATE						

EMPLOYER NA Address: Phone PERIOD OF EM HOURS WORKE POSITION/TITL	-			
PERIOD OF EM HOURS WORKE			CITY	ZIP
HOURS WORKE		EMAIL		
	PLOYMENT: FROM		ТО	
POSITION/TITL	D PER WEEK:			
	.E			
DESCRIBE WOR	RK PERFORMED:			
EMPLOYER NA	ME:			
Address:			CITY	ZIP
Phone		EMAIL		
PERIOD OF EM	PLOYMENT: FROM		ТО	
HOURS WORKE				
POSITION/TITL	.E			
DESCRIBE WOR	RK PERFORMED:			
EMPLOYER NA	ME:			
Address:			CITY	ZIP
Phone		EMAIL		
	PLOYMENT: FROM		ТО	
HOURS WORKE				
POSITION/TITL				
I CERTIFY AL		RE TRUE TO THE BEST OF H THE REGULATIONS ADC		THAT ALL WORK SHALL BE N OF FIRE PREVENTION &
RFORMED IN	4507 404)			
	1507-101).			
ERFORMED IN A DNTROL(8 CCR				