

Gerald R. Leach
Office of State Fire Marshal
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www.maine.gov/dps/fmo/home

**Application / Renewal Form
for Fire Sprinkler License with
CONTRACTOR Endorsement**

Complete this form, then mail it to the above address with a check made out to "Treasurer, State of Maine".

Initial License (\$300)

Renewal or Reinstated License (\$300) My Current (or Expired) License # is: _____

Your license is good for 2 years from the day that it is issued for initial & reinstated licenses or 2 years from expiration date for a renewal.

Your Company Name the way that you want it to appear on your license:

Mailing address:

Street or PO Box: _____

Town: _____ State: _____ Zip: _____

The physical location address where you can be located if different from address above:

Street: _____

Town: _____ State: _____ Zip: _____

Work Phone: _____ Fax: _____

Email Address: _____

Cell Phone: _____ Home Phone: _____

Check if you have any of the following installation certifications:

Kwench Uponor Viega Rehau Watts CPVC

The following info is standardly posted to our website list of current licensees but if you do NOT want the following info on our website then check below:

No-address No-work phone No-fax

Who is(are) the primary decision-maker(s) for the company:

Please remember to keep our office updated of any changes in contact information!

The area below is to be filled in by the Office of State Fire Marshal:

Date Received	Fee Received	Check #	Date Issued	Expiration Date	Number Issued