

Brian Sandoval
Governor



James M. Wright
Director

Bart J. Chambers
State Fire Marshal

State Fire Marshal Division



Request for Information

*Fire Licensing, Permitting, Prevention and
Data Bureau*

Licensing Office

Issued Date: March 1, 2018

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1. Introduction

The State of Nevada, Department of Public Safety, State Fire Marshal Division (SFM) is seeking cost and approach planning information for a replacement software management system for its Fire Protection Licensing Office. Using information obtained from this Request for Information (RFI) and other sources available at our disposal, SFM will establish general fiscal planning amounts for the upcoming budget cycles. Also, SFM will prepare a more formal Request for Proposal (RFP) to be released in the near future soliciting software to transfer current data and replace the current system for Fire Protection Licensing. Like software vendors are encouraged to become familiar with the content presented below as well as attached examples of the current paper applications used by this office. Vendors should demonstrate their interest in the upcoming RFP by responding to this general planning information request. There are also plans for further requests for new database functions to be added in the future such as Certificates of Compliance, Fire Standard Compliant Cigarette Program, Engineering Plans and Inspections.

1.1 Business Background

This office is responsible for the licensing of the Fire Protection Industry for the State of Nevada including but not limited to blasters, pyrotechnic, medical gas, fire performers, flame effect, magicians, retail sale of portable fire extinguishers and interior designers in respect to furniture, fixtures and equipment only.

In order to sell, install or service any fire protection equipment, the company needs to be licensed through this office and in some cases our license is in addition to a State Contractors license being issued.

The Division of the State Fire Marshal takes the protection of the Citizens of Nevada seriously and handles complaints against the industry to ensure that only qualified companies and individuals provide fire protection and investigates any wrong doing in these endeavors.

In Fiscal Year 2017, the Licensing Office issued over 6,000 individual cards to its customers, 1,300 Licenses to companies, and collected more than \$590,000 in fees. There are two personnel assigned to the Licensing office, one Program Officer and one Administrative Assistant.

1.2 Problem Description

The SFM currently uses a licensing software program through GL Solutions, Incorporated who creates, maintains and services their own government software programs. These are web-based and the data is housed at their third party vendor's data center silos. We have been using this program since 2002.

The program has become stagnant, very difficult to upgrade and very costly to the division in time and man-power expended to utilize. This program is a combination of automation and manual features and has several issues that have been attempted to be corrected but to no avail.

The SFM wishes to automate the Licensing process as much as possible, add photo ID cards, investigation module, inspection module and enhance the finance portion of the system that collects fees through checks, money orders, E-Check and Credit Cards. The program must be able to interface with Wells Fargo utilizing technical specifications provided by the Nevada State Treasurer's Office. Other items needed are a portal for jurisdictions and inspectors/investigators to view information, a cleaner and easier to use web presence for customers and companies as well as an easier to navigate and use administrative functioning system. Lastly we require pre-built and on-the-fly reports, ability to make changes to fees, logos, signatures, and add or delete certificate and/or license types as needed as well as uploading/storing documents and photos into the system. It needs to be housed off-site in a very secure data center.

1.3 Opportunity Description

Using a formal Request for Proposal (RFP) process, SFM will solicit, evaluate, and select a replacement licensing software management system.

SFM's requirements are currently under review and development for the subsequent RFP release. Proposed solutions will provide the necessary software, design, and hardware if required and ongoing maintenance and support as described in the future RFP.

The related RFP process will include the following steps:

- Finalize SFM's updated requirements and solicit potential vendors through the RFP process;
- Evaluate and select an appropriate software and hardware solution that best satisfies the SFM's needs;
- Installation, transfer of previous data, reconfiguring of data files to the new format, software, and hardware;
- Test, validation and acceptance of new software, database and storage solutions;
- Provide staff orientation and training; and,
- Launch the final solution into production.

2. Licensing Software and Intuitive Web Presence

The primary purpose of this RFI is to determine what software/web solutions are available to address current concerns and problems as well as gaining an intuitive website for customers, local jurisdictions and licensing staff/administrators and help desk.

This RFI section communicates the SFM's expectations and envisioned direction. Vendors are asked to provide costing and approach information based on the functionality described below. Where appropriate, vendors are encouraged to include additional functionality or components that may be of value or interest to the SFM. Such information should be accompanied with related cost, product or services description information.

2.1 Software and Website Needs

The SFM is seeking a solution that encompasses the full life-cycle for licensing issuance and tracking. The program encompasses all Fire Protection Licensing for the entire State of Nevada and entities that have headquarter locations located outside of Nevada. This database and associated application suite needs to be dynamic, intuitive and able to be expanded for future uses, such as added functions for Certificates of Compliance, Plans, Fire Standard Compliant Cigarette Program and Fire and Life Safety Inspections. If all functions can be built for a cheaper price point, please include your proposal for such.

This part includes the following high-level functions required for the Licensing system ONLY (examples are not exhaustive):

Customer Side

- 1) Easy to navigate system that is not complicated. Welcome screen basically asks what business you are conducting and guides you to the correct office/application, etc.
- 2) Intuitive system, which knows what you need to fill out to get through the process. Example: I need a CofR for an F card; I don't need to see the questions/application for an Interior Designer or Retail Fire Extinguisher, only the fields I require to get an F card with the applicable instructions and NRS/NAC reference.
- 3) All fields listed logically and easy tab to the next field.
- 4) All required fields must be filled out correctly and will not let you move on until they are.
- 5) Fields with specific data requirements have easy to follow instructions built in. Example 1 - date field, must be - MM/DD/YYYY format, Example 2 - photo upload, must be no more than XX size, color, front facing in XX format only. The system will not allow uploads of a different format.
- 6) Once correct information is filled out, payment screen is easy to understand, total amount due is easily reviewed and understandable and process is simple. If they choose to pay via check it accepts that payment method and automatically puts the application into awaiting review until payment is received.
- 7) Make sure the security and privacy policies are clear to the customer.
- 8) Make password requirements secure, but not overly complicated.
- 9) Make recovery password easy.

- 10) Adhere to State Security Policies.
- 11) System will auto email customer for the next renewal cycle at least three months in advance and send reminders up to last day of renewal.
- 12) If customer misses deadline it sends a final reminder that they missed the deadline and will need to re-test (if applicable) if they apply again for the Certificate of Registration (CofR).
- 13) For new and re-test customers, will auto schedule them for the next available testing date loaded into the system by the admin.
- 14) If they fail the test, admin can select this in the system and customer can select if they would like to re-test, based upon Nevada Revised Statutes (NRS) and Nevada Administrative Code (NAC) rules, during the next testing date.
- 15) Customer can sign in to the system upon initial activation in the system and review their information and update accordingly, address, phone number, email address, photo id, etc. If new card is required, fee is applied, collected before reissue.
- 16) System will create the CofR card specific to the individual, photo id, and required information on the card including a one of a kind id number. System will be compatible with IDVille Photo ID system and will use a preset template to print card on the system in single and batch as required. Inspectors in the field, upon request of the CofR Card will have an easy to use website that can tell them the current registrations they are qualified to perform as well as suspended and revoked issues. Licenses for companies will print on the customers own printer or be able to be saved in PDF format (locked).

- 17) In order to show credentials to the administrator, the system must have the ability to allow documents to be uploaded into the system. There should also be an option to mail in the documents. If the mail in option is selected, the application is put into a pending/hold until they are verified, scanned by the system administrator, uploaded to the customers record and approved.

Administrative Side

- 1) Easy to navigate system that is not complicated. A screen that shows activities that need to be worked on, awaiting admin input and questions from customers from the system (help desk activities).
- 2) Ability to approve or disapprove documents, photos sent by the customer and automatically sends customer acknowledgement of these actions via email.
- 3) Ability for Admin to manually key in application data if customer wishes not to use the website to apply.
- 4) Reports, pre-built reports, ability to write on the fly reports in the system....which download in various formats, such as PDF, WORD, EXCEL as required.
- 5) Admin ability to suspend, reinstate and revoke a customer and/or company with the system able to track, investigations into person(s) or company(s) and attach the file to the customers information in the system as well as judgements made and/or fines or fees assessed.
- 6) System knows by being flagged if a customer was revoked and tries to apply again for a CofR or License. Will alert the admin of a possible issue.
- 7) Admin ability to send out mass emails to all customers simultaneously or only select customers, either by name, location, type of license/CofR, etc.

- 8) A finance area that collects fees via credit cards, E-Check, and/or Checks/Money Orders. System can distinguish a large check written for multiple customers by a company and assign the correct payments to the accounts in the system correctly showing any deficits if applicable.
- 9) Admin area to schedule testing, assign location, number of seats, times and system uses this to schedule customers automatically. Ability if necessary to cancel or make changes to testing and system will auto notify customers. System allows customers to drop/cancel testing if necessary because of scheduling conflicts and opens a new available slot in the system which can be auto filled again.
- 10) Admin the ability to download/print list of customers that are testing, type of test required and ability to override the system and add/delete customers for testing.
- 11) Admin the ability to load test scores, approve/disapprove customers if passed or failed accordingly.
- 12) Admin inspection module, for admin to conduct an inspection on customers per the NRS/NAC and record this information accordingly, attached to record.
- 13) Backups and contingency plans as required. System should be able to have high availability, a disaster recovery plan as well as a vendor tech support escalation process.
- 14) Admin ability to create, change or delete license or CofR types in the system as well as update cost or application rules.
- 15) Admin ability to display notification messages on the entry screen of the customer website and change/update as necessary.
- 16) Admin ability to change/update logos and signatures displayed on website, cards issued and licenses.

- 17) Ability for admin/inspector/investigator to connect remotely to database via phone, laptop, PC or tablet to review customer/company information and enter information and notes on the inspection/investigation tied to the customer's record.
- 18) Ability to charge for reprints, reissues, address changes, photo changes when a new card is required.
- 19) Ability to use photos submitted by the customer (CofR Only), and create the photo ID using an IDVille System (purchased by the SFM) to print individual cards or batch cards as required.
- 20) System automatically assigns a CofR number to each registrant as well as automatically assigns a License number for each company. NOTE: CofR registrants can have several types of cards simultaneously and needs to be shown on the ID card. Companies can have several types of licenses as well and need to be on the license.
- 21) Query and Search functions. Ability to run queries and searches based on field of keywords, and the ability search based on any of the report functions.
- 22) Vendor storage of the main system, hosting of website, and backups as required for the system and all of its records collected based on the prescribed methods per the NRS/NAC.
- 23) Account maintenance function. Training for personnel and access to software/website training as required. Provide a useful user manual detailing operations and maintenance of the software as required. Availability of customer service representatives to assist licensing personnel with troubleshooting and technical issues.

- 24) Admin the ability to transmit and adjust all payments as necessary.

2.2 *Licensing Software Approach*

In addition to the above functional and system capability descriptions, the solution should specify:

- Necessary hardware to support the proposed solution;
- Necessary software and related products required to support the proposed solution;
- If there are additional software dependencies, explain who owns the licenses; who is responsible for version upgrades and upgrade compatibility;
- Consulting services to develop, test and implement required interfaces;
- Consulting services to help the SFM convert previous data from the GL Solutions system into the proposed software;
- Consulting services to train and orient end-users and update necessary desk procedures; and
- Consulting services required for adapting all external third party required hardware and software for use with the system.

In their RFI responses vendors should consider the above and provide additional suggestions for successfully implementing potential solutions.

3. RFI Response Scope

As presented above, SFM requires a Licensing solution to process Certificates of Registration Cards (CofRs, Individuals) and Licenses (Companies) for the Fire Protection Industry wishing to work and do business within the State of Nevada. SFM is seeking information from industry knowledgeable vendors that will enhance the SFM's understanding of available solutions. Interested vendors are encouraged to provide insight to different products by responding to the RFI.

RFI responses will provide general product and vendor experience overviews, high-level project approach information, and solution costing information for planning purposes.

3.1 Product Overviews

In their RFI response, vendors are encouraged to describe and provide Licensing Software solutions that would satisfy the SFM's needs as outlined in the RFI. Additional referenced products that may be of value and interest to the SFM are also encouraged. Product marketing material and/or additional vendor explanation is sufficient with associated cost planning information.

3.2 Vendor Experience

In their RFI response, vendors are encouraged to provide information describing their particular technology and experience background and other distinguishing factors as well as any current technologies in use in the State of Nevada and with what departments they have contracted with. Please keep your response within three (3) written pages.

3.3 Project Approach

In their RFI response, vendors are encouraged to provide information that describes their particular project approach for implementing their proposed solution and overall project schedule. Please keep the project approach and schedule response within five (5) written pages.

3.4 Cost Planning Information

A primary purpose of this RFI is to obtain initial costing information for a replacement Licensing management program and website. While the RFI **WILL NOT** result in an award, the SFM believes it is in the vendor community's best interest to assist in providing costing information. After reviewing RFI information, Vendors are requested to:

- Provide costing information for implementing their solution as described by the RFI;
- Provide costing information for optional and/or alternative items that the vendor may describe in their RFI response;
- Include in the costing estimates vendor services for installing equipment and software, configuring equipment and software to meet SFM requirements, updating business desk procedure, transfer for old system

data into the proposed new system, and providing application training, launching the final system; and,

- Include a percentage of total cost required for ongoing product maintenance and general support and updates.

3.5 *Technical Requirements*

An additional purpose of this RFI is to obtain information on the technical requirements for a Licensing software program and website system. While the RFI **WILL NOT** result in an award, the SFM believes it is in the vendor community's best interest to assist in providing technical requirements information. After reviewing the RFI information, Vendors are requested to:

- Provide technical requirements for implementing their solution as described by the RFI. Include hardware and software required to operate the system. Be clear on which items are included in the costing information and which items would be an additional cost to the state;
- Provide technical information for optional and/or alternative items that the vendor may describe in their RFI response;
- Include in the technical information on vendor services for installing equipment and software, configuring equipment and software to meet the SFM requirements, updating business desk procedure and providing application training, converting licensing data from the old system to the new system, and launching the final system; and,
- Include technical information about hosting and on-going hosting services if the infrastructure is vendor provided;
- Include the information on the typical technical approach to the vendor's implementation and ongoing maintenance, including tasks performed by the vendor, and tasks performed by the customer's IT staff if necessary.

4. Vendor Responses

Vendor RFI responses must be submitted within the timelines specified in Table 4, *RFI Events and Schedule*, and in accordance with section 4.2, *Submittal Instructions*, and Section 4.3, *Submission Requirements*, found below.

4.1 *RFI Events and Schedule*

The table below illustrates events and schedule for this RFI. All times are stated as Pacific Standard Time (PST).

Table 4 – RFI Events and Schedule		
RFI Event	Date	Time
RFI release date	March 1, 2018	4:00 pm
Deadline for submitting questions	April 1, 2018	4:00 pm
Answers to questions submitted available on or about	April 15, 2018	4:00 pm
Deadline for submitting RFI responses	May 1, 2018	4:00 pm
Invitations for vendor presentations (Optional)	May 10, 2018	4:00 pm

Note: These dates represent a tentative schedule of events. The State reserves the right to modify these dates and times at any time, with appropriate notice to prospective vendors.

4.2 Submittal Instructions

Written vendor questions and/or comments regarding this RFI will be accepted by the SFM through email. All communication regarding this RFI must include the following:

- RFI Name: Nevada State Fire Marshal – Licensing Program
- Vendor Name;
- Vendor Contact Name;
- Address;
- Telephone Number (including any extensions); and
- Email Address

Communications regarding the RFI are to be directed to:

Danny Brennan

Nevada State Fire Marshal Division

Bureau Chief, Fire Licensing, Permitting, Prevention and Data Offices

107 Jacobsen Way

Carson City, Nevada 89711

Telephone: 775-684-7526
Facsimile: 775-684-7518
Email: dbrennan@dps.state.nv.us

The deadline for submitting questions is found in Table 4, *RFI Events and Schedule*. Vendor RFI questions and/or comments received will be grouped together into a single State response and addressed in writing through email to the vendors submitting questions on the date specified in Table 4.

4.3 *Submission Requirements:*

The SFM requires that each Vendor's EXHIBIT A – VENDOR RESPONSE FORM be submitted via electronic email no later than the submission date and time specified in Table 4, *RFI Events and Schedule*, to:

Danny Brennan

Nevada State Fire Marshal Division
Bureau Chief, Fire Licensing, Permitting, Prevention and Data Offices
107 Jacobsen Way
Carson City, Nevada 89711
Telephone: 775-684-7526
Facsimile: 775-684-7518
Email: dbrennan@dps.state.nv.us

The SFM prefers that other submitted product and vendor information such as descriptions, approaches and supporting data be submitted electronically to the above email address; otherwise, if not possible, the vendor is requested to send the additional material and deliver it to the street address provided above with **Attention: Danny Brennan, New Licensing Program Materials** and your vendor information clearly visible so there is no confusion.

Vendors must complete the EXHIBIT A – VENDOR RESPONSE FORM, and return it as the cover page of their response. SFM does not require a specified formal format for the remainder of the vendor's response.

5. Optional Vendor Presentations

Optional vendor presentations, should they be requested by the SFM, will be conducted at the vendor's own expense **at-no-cost** to the State of Nevada. Vendor presentations may be conducted following the review of vendor RFI responses.

The SFM reserves the right to invite up to five (5) designated vendors to present an overview of their UI modernization products and capabilities. Vendor presentations may occur if:

- The SFM determines it necessary to meet with vendors;
- The SFM determines that potential vendors demonstrated a high-degree of compatibility with the SFM's overall requirements;
- The vendor provided within the overall goal of the cost planning number (will not be released prior to an accepted vendor during the RFP portion); and,
- The vendor indicates an interest to present **at-no-cost** to the SFM and has marked appropriately as such on their Exhibit A, *Vendor Response Form*.

Vendor presentations, should they occur at the SFM's discretion, will be conducted at the vendor's own expense and at no cost to the State of Nevada. Presentations may be conducted following the review of vendor responses.

If invited by the SFM, a vendor's presentation should provide an overview of the vendor's products, experience, if they currently have systems being used in Nevada and at what Departments have been contracted with in the past as well as system and services capabilities, planned implementation approach, references, and anticipated approach schedule. Invitations, if extended, will be to those vendors that meet the criteria outlined above and within the RFI.

5.1 ***RFI Response Review***

Each vendor response will be reviewed by the Nevada State Fire Marshal for the purpose of collecting additional information and knowledge about available products to handle the Licensing program. Information provided by vendors will be used to further enhance the Nevada State Fire Marshal Licensing Program replacement initiative and subsequent RFP.

EXHIBIT A – VENDOR RESPONSE FORM

To be responsive to this RFI, vendors must complete Exhibit A in its entirety and return it as the cover page of their response. The Nevada State Fire Marshal does not have a specified format for vendor responses beyond the inclusion of this exhibit.

Vendor Name	
Vendor Address, City, Zip	
Vendor Point of Contact (POC) Name	
Vendor POC Title	
Vendor POC Email Address	
Vendor POC Phone Number (w/ext.)	
Vendor POC Fax Number	
If invited, are you able to provide at-no-cost to the State a capabilities presentation to the State Fire Marshal Division (Yes / No)?	

EXHIBIT B – COST PLANNING INFORMATION SHEET

The Cost Planning Information sheet, below will be used by the State to assist in fiscal planning for the Nevada State Fire Marshal Licensing Program replacement initiative. To be eligible for an invitation to present, the vendor must provide an overall Licensing Program cost planning figure in line four (4) and seven (7) of the sheet below. Estimated cost information will be used for fiscal and budget planning purposes only.

	Functional Area	Estimated Cost
1	Licensing Software Management Cost Planning Figure	\$
2	One Time Software Costs	\$
3	One Time Website Creation and Management Cost Planning	\$
4	One Time Hardware Costs	\$
5	Total One Time Licensing Program replacement Cost Planning Figure	\$
6	Ongoing Software Maintenance/Licensing Costs (annual)	\$
7	Ongoing Website / Storage Costs (annual)	\$
8	Ongoing Hardware Maintenance/Licensing Costs (annual)	\$
9	Total Annual Ongoing Cost Planning Figure	\$

EXHIBIT C – CERTIFICATE OF REGISTRATION (People)

APPLICATION – EXAMPLE – Page 1



STATE FIRE MARSHAL DIVISION

107 Jacobsen Way
Carson City, NV 89711
Tel: (775) 684-7530
Fax: (775) 684-7518

CERTIFICATE OF REGISTRATION APPLICATION

****Please use the Tab Key****

☐ New Application ☐ Renewal Application ☐ Address Change / Replacement + \$11.00 ☐ Name Change + \$11.00

****Please ensure you are applying for the correct Certificates and updates as there are NO REFUNDS****

Full Legal Name:
Mailing Address:

City:	State:	Zip:	Email:
Telephone:		Social Security or Tax ID Number:	

IF YOU HAVE BEEN CONVICTED OF A FELONY YOU CANNOT OBTAIN REGISTRATION IN NEVADA

Date of Birth:	Age:	Sex:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Height: Ft. In.	Weight:	Hair Color:	Eye Color:

TYPE OF SERVICE - Certificate of Registration Fee must be enclosed!!

<p align="center">Fire Protection Certifications New - \$71.50 (per cert) - Renewal - \$33.00 (per cert)</p> <p><input type="checkbox"/> A - Portable Fire Extinguishers (including B, C and D)</p> <p><input type="checkbox"/> B - Portable Fire Extinguishers</p> <p><input type="checkbox"/> B/C - Type B with Hydrostatic Testing</p> <p><input type="checkbox"/> E - Engineered/Pre-engineered Extinguishing Systems</p> <p><input type="checkbox"/> E/1 - Pre-engineered Fire Extinguishing Systems</p> <p><input type="checkbox"/> E/2 - Engineered Fire Extinguishing Systems</p> <p><input type="checkbox"/> Backflow Testing</p> <p><input type="checkbox"/> Private Hydrant</p> <p><input type="checkbox"/> F - Fire Alarm/Protective Signaling Systems</p> <p><input type="checkbox"/> G - Automatic Fire Sprinkler Systems</p> <p><input type="checkbox"/> Underground Sprinkler Work</p> <p><input type="checkbox"/> H - Hood and Duct Cleaning</p> <p><input type="checkbox"/> I - Standpipe Systems</p> <p><input type="checkbox"/> J - Residential Fire Sprinkler Systems</p> <p><input type="checkbox"/> EWD (Heat Detector)</p> <p><input type="checkbox"/> Medical Gas Installer</p>	<p align="center">Pyrotechnic/Flame Effect Certifications (per cert) New & Renewal: Operator - \$55.00 - Assistant - \$27.50</p> <p><input type="checkbox"/> Champagne Sparkler Presentation (\$55.00)</p> <p>Name of Nightclub: _____</p> <p>Show Specific (Pyro and Flame Effect Only)</p> <p>Name of Hotel: _____</p> <p>Name of Show: _____</p> <table> <tr> <td>Indoor Stage</td> <td>Natural Gas</td> </tr> <tr> <td><input type="checkbox"/> Operator <input type="checkbox"/> Assistant</td> <td><input type="checkbox"/> Operator <input type="checkbox"/> Assistant</td> </tr> <tr> <td>Outdoor Aerial</td> <td>Propane</td> </tr> <tr> <td><input type="checkbox"/> Operator <input type="checkbox"/> Assistant</td> <td><input type="checkbox"/> Operator <input type="checkbox"/> Assistant</td> </tr> <tr> <td>Special Effects</td> <td><input type="checkbox"/> Magician (\$27.50)</td> </tr> <tr> <td><input type="checkbox"/> Operator <input type="checkbox"/> Assistant</td> <td></td> </tr> </table>	Indoor Stage	Natural Gas	<input type="checkbox"/> Operator <input type="checkbox"/> Assistant	<input type="checkbox"/> Operator <input type="checkbox"/> Assistant	Outdoor Aerial	Propane	<input type="checkbox"/> Operator <input type="checkbox"/> Assistant	<input type="checkbox"/> Operator <input type="checkbox"/> Assistant	Special Effects	<input type="checkbox"/> Magician (\$27.50)	<input type="checkbox"/> Operator <input type="checkbox"/> Assistant	
Indoor Stage	Natural Gas												
<input type="checkbox"/> Operator <input type="checkbox"/> Assistant	<input type="checkbox"/> Operator <input type="checkbox"/> Assistant												
Outdoor Aerial	Propane												
<input type="checkbox"/> Operator <input type="checkbox"/> Assistant	<input type="checkbox"/> Operator <input type="checkbox"/> Assistant												
Special Effects	<input type="checkbox"/> Magician (\$27.50)												
<input type="checkbox"/> Operator <input type="checkbox"/> Assistant													

Employment Record (List all your employers for the past two years)

Presently Employed by:	From:	To: Present
Address:	City:	
State: Zip: Tel. No.:	Fax:	
Firm:	From:	To:
Address:	City:	State: Zip:
Firm:	From:	To:
Address:	City:	State: Zip:

EXHIBIT C – CERTIFICATE OF REGISTRATION (People) APPLICATION – EXAMPLE – Page 2

SECTION BELOW MUST BE COMPLETED BY ALL APPLICANTS OR THIS APPLICATION WILL BE RETURNED:

I have ☐ have not ☐ (check one) been convicted of a felony.

I hereby authorize the State Fire Marshal Division to conduct a background investigation on me.

I hereby certify that I am familiar with the Nevada Revised Statutes and the Nevada State Fire Marshal Regulations relating to the type of endorsements on the certificate and that all statements made by me on this application are to best of my knowledge true and correct. I also understand that any false statements or material misrepresentations on this application may be cause for denial, suspension or revocation of a certificate of registration.

Name (Please Print)

Signature

Date



Certificate of Registration All Others Application 01292016.doc
Page 2 of 2

EXHIBIT D – CERTIFICATE OF REGISTRATION (Blasters) APPLICATION – EXAMPLE – Page 1



STATE FIRE MARSHAL DIVISION

107 Jacobsen Way
Carson City, NV 89711
Tel: (775) 684-7530
Fax: (775) 684-7518

CERTIFICATE OF REGISTRATION APPLICATION BLASTERS

****Please use the Tab Key****

☐ New Application - \$55.00 ☐ Renewal Application - \$55.00 ☐ Address Change / Replacement - \$11.00 ☐ Name Change - \$11.00

****Please ensure you are applying for the correct Certificates and updates as there are NO REFUNDS****

Full Legal Name:
Mailing Address:

City:	State:	Zip:	Email:
Telephone:		Social Security or Tax ID Number:	

IF YOU HAVE BEEN CONVICTED OF A FELONY YOU CANNOT OBTAIN REGISTRATION IN NEVADA

Date of Birth:		Age:	Sex:	<input type="checkbox"/> Male	<input type="checkbox"/> Female
Height:	Ft. In.	Weight:	Hair Color:	Eye Color:	

TYPE OF SERVICE - **Certificate of Registration Fee must be enclosed!!**

Initial Application **Must** Include the Following:

Fee
Application
Letter from Company on Company Letterhead
Resume
ATF Clearance / Possessor Letter(s)
Reciprocity May Be Considered

Renewal Applications **Must** Include the Following:

Fee
Application

Employment Record (***List all your employers for the past two years***)

Presently Employed by:			From:	To: Present
Address:			City:	
State:	Zip:	Tel. No.:	Fax:	
Firm:			From:	To:
Address:			City:	State: Zip:
Firm:			From:	To:
Address:			City:	State: Zip:

EXHIBIT D – CERTIFICATE OF REGISTRATION (Blasters)

APPLICATION – EXAMPLE – Page 2

SECTION BELOW MUST BE COMPLETED BY ALL APPLICANTS OR THIS APPLICATION WILL BE RETURNED:

I have ☐ have not ☐ (check one) been convicted of a felony.

1. I am at least 21 years of age.
2. I understand and give written and oral orders in the English language.
3. I am not addicted to, nor have prior certification of addiction to alcohol, narcotics, or dangerous drugs as specified in the Nevada Revised Statutes, chapters 453, 454, 585 and 639.
4. I have not been convicted of a felony in this or any other state.
5. I have a working knowledge of Federal, State and Local laws and regulations pertaining to the storage, use and handling of explosive materials.
6. I am qualified by reason of training, knowledge and field experience in safe storage, use and handling of explosive materials applicable to the class of permit.

I hereby authorize the State Fire Marshal Division to conduct a background investigation on me.

I hereby certify that I am familiar with the Nevada Revised Statutes and the Nevada State Fire Marshal Regulations relating to the type of endorsements on the certificate and that all statements made by me on this application are to best of my knowledge true and correct. I also understand that any false statements or material misrepresentations on this application may be cause for denial, suspension or revocation of a certificate of registration.

Name (Please Print)

Signature

Date



Certificate of Registration Application - Blasters 01282016.doc
Page 2 of 2

EXHIBIT E – CERTIFICATE OF REGISTRATION (Fire Performers) APPLICATION – EXAMPLE – Page 1



STATE FIRE MARSHAL DIVISION

107 Jacobsen Way
Carson City, NV 89711
Tel: (775) 684-7530
Fax: (775) 684-7518

CERTIFICATE OF REGISTRATION APPLICATION FIRE PERFORMERS

****Please use the Tab Key****

☐ New Application ☐ Renewal Application ☐ Address Change / Replacement + \$11.00 ☐ Name Change + \$11.00
****Please ensure you are applying for the correct Certificates and updates as there are NO REFUNDS****

Full Legal Name:
Mailing Address:

City:	State:	Zip:	Email:
Telephone:		Social Security or Tax ID Number:	

IF YOU HAVE BEEN CONVICTED OF A FELONY YOU CANNOT OBTAIN REGISTRATION IN NEVADA

Date of Birth:	Age:	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female
Height: Ft. In.	Weight:	Hair Color: Eye Color:

TYPE OF SERVICE - Certificate of Registration Fee must be enclosed!!

Pyrotechnic / Flame Effect Certifications (per cert) <i>Operator - \$55.00 - Assistant - \$27.50</i>	
<input type="checkbox"/> Champagne Sparkler Presentation Name of Nightclub: _____	
<input type="checkbox"/> Show Specific (Pyro and Flame Effect Only) Name of Hotel: _____ Name of Show: _____	
Indoor Stage <input type="checkbox"/> Operator <input type="checkbox"/> Assistant	Natural Gas <input type="checkbox"/> Operator <input type="checkbox"/> Assistant
Outdoor Aerial <input type="checkbox"/> Operator <input type="checkbox"/> Assistant	Propane <input type="checkbox"/> Operator <input type="checkbox"/> Assistant
Special Effects <input type="checkbox"/> Operator <input type="checkbox"/> Assistant	
Fire Performer (21 Years or Older) - \$27.50 Fire Performer Apprentice (18-20 Years Old) - \$27.50 Magician - \$27.50 <input type="checkbox"/> Fire Performer <input type="checkbox"/> Fire Performer Apprentice Name of Group you Perform with: _____	
Initial Application <u>Must</u> Include the Following: Fee Notarized Application Letter of Knowledge and Experience List of Safety Devices Used Child Support Form	
Renewal Applications <u>Must</u> Include the Following: Fee Notarized Application Child Support Form <input type="checkbox"/> Magician	

Employment Record *(List all your employers for the past two years)*

Presently Employed by:		From:	To: Present
Address:		City:	
State:	Zip:	Tel. No.:	Fax:
Firm:		From:	To:
Address:		City:	State: Zip:
Firm:		From:	To:
Address:		City:	State: Zip:

EXHIBIT E – CERTIFICATE OF REGISTRATION (Fire Performers) APPLICATION – EXAMPLE – Page 2

SECTION BELOW MUST BE COMPLETED BY ALL APPLICANTS OR THIS APPLICATION WILL BE RETURNED:

I have ☐ have not ☐ (check one) been convicted of a felony.

I hereby authorize the State Fire Marshal Division to conduct a background investigation on me.

I hereby certify that I am familiar with the Nevada Revised Statutes and the Nevada State Fire Marshal Regulations relating to the type of endorsements on the certificate and that all statements made by me on this application are to best of my knowledge true and correct. I also understand that any false statements or material misrepresentations on this application may be cause for denial, suspension or revocation of a certificate of registration.

Name (Please Print)

Signature

Date

THIS APPLICATION MUST BE NOTARIZED PRIOR TO SENDING TO THE FIRE MARSHAL DIVISION FOR PROCESSING OR IT WILL BE REJECTED.

State of _____

County of _____

Subscribed and sworn this _____ day of _____, 20__ by _____
Signature of Applicant

Notary Signature



Certificate of Registration Application - Fire Performers 01282016.doc
Page 2 of 2

EXHIBIT E – CERTIFICATE OF REGISTRATION (Fire Performers) APPLICATION – EXAMPLE – Page 3

Nevada State Fire Marshal
107 Jacobsen Way
Carson City NV 89711
(775) 684-7530

Child Support Declarations: Mark selections and sign the signature block.

[Renewals will not be accepted unless the forms are properly completed and signed.
NRS 477.225]

CHILD SUPPORT DECLARATION:

In compliance with the Federal Welfare Reform Act and the Nevada State Welfare Division, the 2011 session of the Nevada Legislature enacted NRS 477.225. This requires that **all** professional and occupational licensing agencies add specific questions regarding child support to **all** applications for new licenses and license renewals.

Failure to mark one of the boxes will result in denial of your renewal.

- ☐ **I am not subject to a court order** for payment of child support.
- ☐ **I am subject to a court order** for payment of child support for one or more children, and I am in compliance with the order or a plan approved by the district attorney or other public agency enforcing the order for the payment of the amount owed pursuant to the order.
- ☐ **I am subject to a court order** for the support of one or more children, and I am not in compliance with the order or a plan approved by the district attorney or other public agency enforcing the order for the payment of the amount owed pursuant to the order.

Print name:

C of R# **FP-**_____

Signature

Date

**See NRS 477. 220 - 477.226 at www.fire.nv.gov under "Hot Topics"

Child Support Declaration 01152016

EXHIBIT F – INTERIOR DESIGN LICENSE / CERTIFICATE OF REGISTRATION APPLICATION – EXAMPLE – Page 1



STATE FIRE MARSHAL DIVISION

107 Jacobsen Way
Carson City, NV 89711
Tel: (775) 684-7530
Fax: (775) 684-7518

INTERIOR DESIGN LICENSE APPLICATION

****Please use the Tab Key****

☐ New Application ☐ Renewal Application ☐ Address Change / Replacement + \$11.00 ☐ Name Change + \$11.00

****Please ensure you are applying for the correct Licenses and updates as there are NO REFUNDS****

Initial Application for Furniture, Fixtures and Equipment (FF&E) **Must** Include the Following:

Fee *(Company and Individual \$100.00, Additional Individuals are \$50.00 Each)*
Application
Transcript Reflecting Completion of Classes in Building and Fire Codes
or Certificate of Completion in Interior Design

Renewal Applications **Must** Include the Following:

Fee *(Company and Individual \$50.00, Additional Individuals are \$50.00 Each)*
Application

Name of Firm:			
Address of Firm:			
City:	State:	Zip:	Email:
Business Telephone:		Business Fax:	

Secretary of State Business License Number: NV _____
(Notice: You must meet this requirement prior to submitting an application to the State Fire Marshal Office)

Employer Identification Number (EIN): _____ or

Tax Identification Number (TIN): _____

Applying to do Business as:

☐ Sole Proprietor ☐ Limited Partnership ☐ Corporation ☐ Limited Liability Company ☐ General Partnership
☐ Joint Venture ☐ Government ☐ Not for Profit ☐ Other _____

EXHIBIT F – INTERIOR DESIGN LICENSE / CERTIFICATE OF REGISTRATION APPLICATION – EXAMPLE – Page 2

GIVE NAME OF OWNER: If applicant is a partnership, give name of each partner. If a corporation, give name of officer and manager responsible for each type of service for which license is sought. **[THIS INFORMATION IS MANDATORY]**

Name:	Title:
Date of Birth:	Social Security Number: - -

Name:	Title:
Date of Birth:	Social Security Number: - -

Resident Agent:			
Agent Address:			
City:	State:	Zip:	Business Telephone:

List of Employees		
Name	C of R Number	Expiration Date

Liability Insurance Information

Name of Carrier:			
Address of Carrier:			
City:	State:	Zip:	Local Agent's Name:
Business Telephone:		Business Fax:	

Has your firm ever been convicted, either administratively or criminally of violating the Nevada Revised Statutes, State Fire Marshal Regulations in this state? ☐ Yes ☐ No

Have any of the owners or principals of the firm been convicted, either administratively or criminally of violating the Nevada Revised Statutes, State Fire Marshal Regulations in this state? ☐ Yes ☐ No

If you answered yes on either of these two questions, please attach a separate sheet with the explanations of the convictions and what the outcomes and penalties were.

I hereby certify that I am familiar with the Nevada Revised Statutes and the Nevada State Fire Marshal Regulations and that all statements made by me on this application are to best of my knowledge true and correct. I am aware of the provision of Chapter 616 of the Nevada Revised Statutes relating to Industrial Insurance for employees. I also understand that any false statements or material misrepresentations on this application may be cause for denial, suspension or revocation of the license.

I hereby authorize the Nevada State Fire Marshal and any of their properly authorized assistants to enter, examine and inspect any premises, building, room or establishment related to the business to determine compliance with the provisions of State Law Regulations and Standards adopted by the Nevada State Fire Marshal.

INSTRUCTIONS FOR SIGNING: An application by an individual must be signed by that individual - An application by a partnership must be signed by each partner - An application made by a corporation must be signed by an officer of the company.

Signature Title

Signature Title



EXHIBIT F – INTERIOR DESIGN LICENSE / CERTIFICATE OF REGISTRATION APPLICATION – EXAMPLE – Page 3



STATE FIRE MARSHAL DIVISION

107 Jacobsen Way
Carson City, NV 89711
Tel: (775) 684-7530
Fax: (775) 684-7518

CERTIFICATE OF REGISTRATION APPLICATION INTERIOR DESIGN - INDIVIDUAL

****Please use the Tab Key****

☐ New Application ☐ Renewal Application ☐ Address Change / Replacement - \$11.00 ☐ Name Change - \$11.00

****Please ensure you are applying for the correct Certificates and updates as there are NO REFUNDS****

Full Legal Name:
Mailing Address:

City:	State:	Zip:	Email:
Telephone:		Social Security or Tax ID Number:	

IF YOU HAVE BEEN CONVICTED OF A FELONY YOU CANNOT OBTAIN REGISTRATION IN NEVADA

Date of Birth:	Age:	Sex:	<input type="checkbox"/> Male	<input type="checkbox"/> Female
Height: Ft. In.	Weight:	Hair Color:	Eye Color:	

TYPE OF SERVICE - Certificate of Registration Fee must be enclosed!!

Initial Application for Furniture, Fixtures and Equipment (FF&E) **Must** Include the Following:

Fee (*Company and Individual \$100.00, Additional Individuals are \$50.00 Each*)
Application
Transcript Reflecting Completion of Classes in Building and Fire Codes
or Certificate of Completion in Interior Design

Renewal Applications **Must** Include the Following:

Fee (*Company and Individual \$50.00, Additional Individuals are \$50.00 Each*)
Application

Employment Record (*List all your employers for the past two years*)

Presently Employed by:			From:	To: <i>Present</i>
Address:			City:	
State:	Zip:	Tel. No.:	Fax:	
Firm:			From:	To:
Address:			City:	State: Zip:
Firm:			From:	To:
Address:			City:	State: Zip:

EXHIBIT F – INTERIOR DESIGN LICENSE / CERTIFICATE OF REGISTRATION APPLICATION – EXAMPLE – Page 4

SECTION BELOW MUST BE COMPLETED BY ALL APPLICANTS OR THIS APPLICATION WILL BE RETURNED:

I have ☐ have not ☐ (check one) been convicted of a felony.

I hereby authorize the State Fire Marshal Division to conduct a background investigation on me.

I hereby certify that I am familiar with the Nevada Revised Statutes and the Nevada State Fire Marshal Regulations relating to the type of endorsements on the certificate and that all statements made by me on this application are to best of my knowledge true and correct. I also understand that any false statements or material misrepresentations on this application may be cause for denial, suspension or revocation of a certificate of registration.

Name (Please Print)

Signature

Date



EXHIBIT G – LICENSE APPLICATION (Companies) – EXAMPLE – Page 1



STATE FIRE MARSHAL DIVISION

107 Jacobsen Way
Carson City, NV 89711
Tel: (775) 684-7530
Fax: (775) 684-7518

LICENSE APPLICATION

****Please use the Tab Key****

☐ New Application ☐ Renewal Application ☐ Address Change / Replacement + \$11.00 ☐ Name Change + \$11.00

****Please ensure you are applying for the correct Licenses and updates as there are NO REFUNDS****

Fire Protection Licenses	Pyrotechnics/Flame Effect Licenses
<input type="checkbox"/> A - Portable Fire Extinguishers (including B, C and D) - \$440.00	Pyrotechnic Licenses
<input type="checkbox"/> B - Portable Fire Extinguishers \$357.50	<input type="checkbox"/> Champagne Sparkler Presentation - \$110.00
<input type="checkbox"/> B/C - Type B with Hydrostatic Testing - \$375.00	<input type="checkbox"/> Indoor Stage - \$110.00
<input type="checkbox"/> E - Engineered/Pre-engineered Systems - \$275.00	<input type="checkbox"/> Outdoor Aerial - \$110.00
<input type="checkbox"/> E/1 - Pre-engineered Extinguishing Systems - \$137.50	<input type="checkbox"/> Special Effects - \$110.00
<input type="checkbox"/> E/2 - Engineered Fire Extinguishing Systems - \$137.50	Flame Effects
<input type="checkbox"/> F - Fire Alarm/Protective Signaling Systems - \$440.00	<input type="checkbox"/> Natural Gas - \$110.00
<input type="checkbox"/> G - Automatic Fire Sprinkler Systems - \$440.00	<input type="checkbox"/> Propane - \$110.00
<input type="checkbox"/> GU - Underground Sprinkler Work - \$247.50	<input type="checkbox"/> Solid - \$110.00
<input type="checkbox"/> EWD (Heat Detector) \$110.00	
<input type="checkbox"/> H - Hood and Duct Cleaning \$440.00	
<input type="checkbox"/> I - Standpipe Systems \$440.00	
<input type="checkbox"/> J - Residential Fire Sprinkler Systems - \$440.00	
<input type="checkbox"/> Backflow Testing \$247.50	
<input type="checkbox"/> Private Hydrant \$247.50	
<input type="checkbox"/> Medical Gas \$247.50	

The required non-returnable fee must accompany this application. A separate application and fee for a license shall be submitted for each business location. For fire protection firms, one copy each of your service tag and hydrostatic test label must accompany this application. Complete answers must be given to all questions.

Name of Firm:			
Address of Firm:			
City:	State:	Zip:	Email:
Business Telephone:		Business Fax:	

Is Company registered with the State Contractors Board: ☐ Yes ☐ No

If yes, give Classification Number: _____ and License Number: _____

Secretary of State Business License Number: NV _____

(Notice: You must meet this requirement prior to submitting an application to the State Fire Marshal Office)

Pursuant to NRS 76.100 A State business license is required; application and fee for license; activities constituting conduct of business. A person shall not conduct a business in this State unless and until the person obtains a state business license issued by the Secretary of State.

Page 31 of 34

EXHIBIT G – LICENSE APPLICATION (Companies) – EXAMPLE – Page 3

I hereby certify that I am familiar with the Nevada Revised Statutes and the Nevada State Fire Marshal Regulations and that all statements made by me on this application are to best of my knowledge true and correct. I am aware of the provision of Chapter 616 of the Nevada Revised Statutes relating to Industrial Insurance for employees. I also understand that any false statements or material misrepresentations on this application may be cause for denial, suspension or revocation of the license.

I hereby authorize the Nevada State Fire Marshal and any of their properly authorized assistants to enter, examine and inspect any premises, building, room or establishment related to the business to determine compliance with the provisions of State Law Regulations and Standards adopted by the Nevada State Fire Marshal.

INSTRUCTIONS FOR SIGNING: An application by an individual must be signed by that individual - An application by a partnership must be signed by each partner - An application made by a corporation must be signed by an officer of the company.

_____ Signature	_____ Title
_____ Signature	_____ Title
_____ Signature	_____ Title
_____ Signature	_____ Title
_____ Signature	_____ Title



EXHIBIT H – EXTINGUISHER RETAIL SALES APPLICATION EXAMPLE



STATE FIRE MARSHAL DIVISION

107 Jacobsen Way
Carson City, NV 89711
Tel: (775) 684-7530
Fax: (775) 684-7518

FIRE EXTINGUISHER RETAIL SALES LICENSE APPLICATION

****Please use the Tab Key****

☐ New Application ☐ Renewal Application

*This application must be accompanied by a **\$27.50 non-refundable fee**. A separate application and fee for a license must be submitted for each business location. Complete answers must be given to all questions.*

Store Name and Number:			
Address of Store:			
City:	State:	Zip:	Email:
Business Telephone:		Business Fax:	

Applying to do Business as: ☐ Individual ☐ Partnership ☐ Corporation ☐ LLC

FIRE EXTINGUISHERS MARKETED

Manufacturer(s)	Model Number(s)	Size(s)

If additional space is needed, attach a separate sheet of paper.

Which of the following agencies have approved these extinguishers? The information is found on the extinguisher's label.

☐ Underwriters Laboratories ☐ Factory Mutual – FM ☐ U.S. Coast Guard – USCG ☐ Other: _____

Submitted by Name & Title:			
Address:			
City:	State:	Zip:	Telephone:
Email:		Fax Number:	

I understand that any false statements or material misrepresentations on this application may be cause for denial, suspension or revocation of the license.

Secretary of State Business License Number: NV _____

Tax Identification Number: _____



RSFE Application 01282016

EXHIBIT I – SIMPLE PROCESS FLOW

- 1) Customer downloads required application from State Fire Marshal Website.
- 2) Customer sends in application and all required documentation through snail mail.
- 3) Program administrator collects application and all applicable documentation and processes it;
 - a. If a new customer, creates a file folder for current and all future correspondence, as well as manually enters all data into the current database. If a renewal, data reviewed and any changes done in the database.
 - b. If all required information is present with payment, data entered into database and customer card (individual) or license (company) is created, unless there is a test involved, then customer scheduled for test.
 - c. If test is required, customer takes test and if passes then card is created.
 - d. Administrator creates and sends cards or license through snail mail.
- 4) All accounting functions are done manually through our accounting office with copies of applications and the physical check.
- 5) We do offer an option of payment via credit card, however because it's all done manually over the phone, it is ever rarely used.
- 6) There are penalties and extra charges for lost cards being remade, and address changes, but that process is very complicated and can be explained at a later date and time through the RFP.
- 7) Part of the customers file is paper and the other half is electronic at this time. We currently have no way of uploading documents into the system.
- 8) Cards are perforated pre-printed 3 part paper stock created by the State Printing on 8x11 stock which makes 3 cards and licenses are pre-printed 8x11 designed paper.