



# 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 <input type="checkbox"/> B - Portable Fire Extinguishers \$357.50 <input type="checkbox"/> B/C - Type B with Hydrostatic Testing - \$375.00 <input type="checkbox"/> E - Engineered/Pre-engineered Systems - \$275.00 <input type="checkbox"/> E/1 - Pre-engineered Extinguishing Systems - \$137.50 <input type="checkbox"/> E/2 - Engineered Fire Extinguishing Systems - \$137.50 <input type="checkbox"/> F - Fire Alarm/Protective Signaling Systems - \$440.00 <input type="checkbox"/> G - Automatic Fire Sprinkler Systems - \$440.00 <input type="checkbox"/> GU - Underground Sprinkler Work - \$247.50	<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  <b>Pyrotechnic Licenses</b> <input type="checkbox"/> Champagne Sparkler Presentation - \$110.00 <input type="checkbox"/> Indoor Stage - \$110.00 <input type="checkbox"/> Outdoor Aerial - \$110.00 <input type="checkbox"/> Special Effects - \$110.00  <b>Flame Effects</b> <input type="checkbox"/> Natural Gas - \$110.00 <input type="checkbox"/> Propane - \$110.00 <input type="checkbox"/> Solid - \$110.00

*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.*

<b>Name of Firm:</b>			
<b>Address of Firm:</b>			
<b>City:</b>	<b>State:</b>	<b>Zip:</b>	<b>Email:</b>
<b>Business Telephone:</b>		<b>Business Fax:</b>	

**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.*



*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.

_____ <b>Signature</b>	_____ <b>Title</b>
_____ <b>Signature</b>	_____ <b>Title</b>
_____ <b>Signature</b>	_____ <b>Title</b>
_____ <b>Signature</b>	_____ <b>Title</b>
_____ <b>Signature</b>	_____ <b>Title</b>

