

**MINNESOTA DEPARTMENT OF PUBLIC SAFETY**  
**STATE FIRE MARSHAL DIVISION**  
**Fire Protection System Section**  
444 Cedar Street, Suite 145  
St. Paul, MN 55101-5145  
(651) 201-7200 / TDD (651) 296-2700

**APPLICATION FOR MINNESOTA STATUTE 299M. FIRE PROTECTION**  
**JOURNEYMAN SPRINKLER FITTER CERTIFICATION/MANAGING EMPLOYEE**

Applying for:   \_\_\_  Journeyman Sprinkler Fitter Certificate                   \_\_\_  Limited Journeyman Sprinkler Fitter Certificate  
                  \_\_\_  Managing Employee Certification                       \_\_\_  Conditional Journeyman Sprinkler Fitter Certificate

Name (last, first, middle initial)
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Home Address (number and street)
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City	State	Zip
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Work Phone (    )   -   (    )   -	Home Phone (    )   -   (    )   -	Date of Birth	Driver License #
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Name of Company  
**(Managing employee only)** \_\_\_\_\_

The journeyman applicant must submit this application, accompanied by a certification fee of \$75.00 to the **Minnesota State Fire Marshal Division**, along with documentation that the applicant meets the qualifications to become a journeyman as set forth in subpart 2 of the Minnesota Rules, Chapter 7512.1700; documentation that the applicant passed the examination; and a completed tax information form required by the commissioner of revenue under Minnesota Statutes, Section 270.72.

The managing employee application must submit this application, accompanied by a certification fee of \$75.00, to the **Minnesota State Fire Marshal Division**, along with documentation that the applicant meets the qualifications to become a managing employee as set forth in Minnesota Rules, Chapter 7512.1300; documentation that the applicant passed the examination; and a completed tax information form required by the commissioner of revenue under Minnesota Statutes, Section 270.72.

**EXAM RESULTS MUST ACCOMPANY THIS APPLICATION.**

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

Signature \_\_\_\_\_ Date \_\_\_\_\_

**All data requested on a sprinkler fitter certificate application is required by law or administrative rule. The information is used to identify your sprinkler fitter certificate record and determine your eligibility for a sprinkler fitter certificate. Failure to provide required information may result in denial of certificate. Except for the Driver's License Number, all information on the application is public and copies of the application with the Driver's License Number blacked out, or its information without the Driver's License number may be issued to anyone.**