
INFORMATION FOR FIRE PROTECTION CONTRACTOR REGISTRATION

Section 4114 of the Columbus Code requires the following be presented in order to secure a contractor registration:

To work in the City of Columbus, contractors must have an active Individual Installer Registration, and an active Fire Protection Company Registration.

If the same individual will be applying for Company and Individual Installer registrations, only one application needs to be completed.

NOTE:

Individual name and company name must be listed identically on all documents. Please review all information and have your application notarized before filing for a registration.

FIRE PROTECTION COMPANY REQUIREMENTS:

- Ohio Division of State Fire Marshal Registration Application for the Company; completed and signed by the person chosen to be the responsible party for the company registration. This application must be notarized.
- A Bond in the amount of \$25,000. The enclosed bond form must be used. Specific information for bond completion may be found on the enclosed bond information sheet.
- A copy of the Company's current certificate with Ohio's Division of State Fire Marshal. A Columbus registration will be issued in the name of the business entity as it appears on the Ohio Division of State Fire Marshal certificate.

INDIVIDUAL INSTALLER REQUIREMENTS:

- Ohio Division of State Fire Marshal Registration Application for the Individual; completed and signed by the certified installer certificate holder. This application must be notarized.
- A copy of **both** sides of the Individual Installer's current certificate with Ohio's Division of State Fire Marshal.

REGISTRATION FEE

Information can be found in the Contractor License & Registration Fees area of the Combined Development Related Fee Schedule

The application may be submitted to:

BZSLicensing@Columbus.gov

-OR-

City of Columbus – Department of Building & Zoning Services
111 Front Street
Columbus, Ohio 43215

Fees can be paid with a payment card, check, or cash in our office. Checks should be made payable to Columbus City Treasurer. Applications received without payment will be setup for fees to be paid with a payment card or electronic check through our Citizen Access Portal (columbus.gov/ca). We do not accept payment by phone.

If you would like more details, please contact the Customer Service Center at BZSLicensing@Columbus.gov or (614) 645-7433.

For additional information, visit us online at <https://new.columbus.gov/Business-Development/Business-Licenses-Resources/Contractor-Licenses>



Application No.: _____

Official Use Only

Ohio Division of State Fire Marshal Contractor Registration Application

111 N Front Street, Columbus, Ohio 43215
Phone: 614-645-7433 • Email: bzslicensing@columbus.gov • www.bzs.columbus.gov

ALL FEES ARE NON-REFUNDABLE • Make checks payable to: Columbus City Treasurer

Type of Registration: **Company** **Individual** (check categories below) **Date** _____

Automatic Sprinkler & Standpipe Systems
Fire Alarm & Detection Equipment
Fire Pumps

Pre-Engineered Extinguishing Equipment (OTW)
Engineered Extinguishing Equipment (OTW)
Fire Service Mains

NOTE: Attach a copy of Ohio Division of State Fire Marshal certificate for registration(s) requested (company or individual installer). For application requirements for ANY license, refer to Columbus Building Code, Chapter 4114.

PART I: QUALIFICATION CERTIFICATE HOLDER INFORMATION

I, the undersigned, an Ohio Division of State Fire Marshal Certificate Holder, confirm that I am associated with the following business concern as a legal full-time officer, proprietor, partner, or employee. I will be actively engaged in and perform work only for the business concern listed below. I hereby apply for the selected Contractor Registration(s), in the City of Columbus, Ohio, and for that purpose give the following information and answers to ALL of the questions contained in this application.

Full Name

Date of Birth

Business Name

Business Address

City, State, Zip

Business Telephone Number/Ext.

Email Address for notification of permits issued under applicant's registration: _____

Email Address for communication related to issuance of applicant's registration: _____

Have you previously held this type of registration with the City of Columbus? Yes No

If YES, provide the following if known; Registration Number: _____ Expiration Date: _____

Have you ever been summoned before any City of Columbus Contractor Board of Review for any type of violation hearing? Yes No

If YES, which board? _____ Date _____ Board Decision _____

PART II: STATEMENT BY APPLICANT

I hereby certify that, to the best of my knowledge and belief, all statements made herein or attached are complete and accurate. I understand that any false statements later disclosed may cause loss of my right of registration, and may subject me to prosecution under Ohio Revised Code Section 2921.13.

Signature of Applicant
(sign in presence of notary or Building & Zoning Services Official)

Print/Type Name

Date

Sworn to before me and signed in my presence this _____ day of _____, in the year _____

Notary Seal Here

Signature of Notary Public or Building & Zoning Services Official

My Commission Expires