

Michigan Department of Licensing and Regulatory Affairs
Bureau of Fire Services
P.O. Box 30700
Lansing, MI 48909
517-241-8847

Type of Application: New Certification Recertification Change of Address

Name (Last Name, First Name, Middle Initial)	Last 4 Digits of SSN
Smith, John A.	1234
Johnson, Mary B.	5678
Williams, Robert C.	9012
Davis, Susan E.	3456
Garcia, Carlos F.	7890
Miller, David G.	2345
Wilson, Emily H.	6789
Moore, James I.	0123
Taylor, Rachel J.	4567
Anderson, Michael K.	8901

Address _____ City, State, Zip Code _____

County _____ Phone (Include Area Code) _____

Email	CFI#
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I have been convicted of any misdemeanor or felony reasonably related to my ability to perform as a fire inspector.

If yes, you will be provided with a "Request for Conviction History" form. Failure to accurately respond to this question will result in you forfeiting any rights of consideration for certification as a Certified Fire Inspector in the state of Michigan.

Department

Address _____ City, State, Zip Code _____

Phone (Include Area Code) _____ Immediate Supervisor _____

Are you 18 years old or older? Yes No

Have you graduated from an accredited high school or have received a General Education Development test certificate from the Department of Education?	Yes	No

Can you read and write English?	Yes	No

Are you of good moral character?	Yes	No

For the purpose of these rules, a conviction or a misdemeanor or felony which involves theft, dishonesty, or false statement shall be considered as an indication that a person is not likely to serve in a fair, honest, and open manner.

Are you employed by a governmental agency as a fire inspector supervisor or a fire inspector conducting

fire inspections for no less than 4 hours per week?

Yes No

Do you hold an NFPA Fire Inspector I certification or the equivalent, as determined by the Bureau of Fire

Services in consultation with the State Fire Safety Board?

Yes No

Provide your NFPA I Certificate number *(Please also attach a copy of your NFPA 1 Certificate)*

Section E

CFI Recertification CE Record (Re-Certifications)

I have completed and attached the BFS CFI Continuing Education Record.

I understand the following requirements pursuant to CE/Recertification:

- *During the three-year period of my certification, I must complete a minimum of 10 continuing education points per year and not less than 60 points as outlined in the Bureau of Fire Service, Fire Inspector Certification Rules, R29.506.*
- *I will furnish documentation of education, experience and training upon request of the Bureau of Fire Services.*
- *I will complete and submit an application of recertification to the Bureau of Fire Services within 60 Days of the expiration of the 3-year certification period.*
- *All misdemeanor and felony convictions which involve theft, dishonesty, or false statement shall be reported.*

Section F

Applicant Certification and Signature (All Applications)

I hereby certify the information in this application is true and correct to the best of my knowledge.

The statements in this application are true and correct. I have not withheld information which might affect the decision to be made on this application. In signing this application, I am aware that a false statement or dishonest answer may be grounds for denial of my application or revocation of my certification.

Signature of Applicant

Date

Instruction for State Certified Fire Inspector Application

Section A – All Applications

1. Indicate the Type of Application.

Section B- All Applications

1. Enter your name: Last Name, First Name and Middle Initial.
2. Enter only the last 4 digits of your Social Security Number.
3. Enter your complete street number and name.
4. Enter your City.
5. Enter your State.
6. Enter your Zip Code.
7. Enter the County your address is in.
8. Enter your phone number with area code.
9. Enter your entire email address.
10. Enter your Certified Fire Inspector number, only needed if this a renewal or change of address.
11. Attest to any misdemeanor or felony that is reasonably related to your ability to perform as a fire inspector.

Section C- New and Re-Certifications

1. Enter the current department of employment.
2. Enter the address of the current department of employment.
3. Enter the city of the current department of employment.
4. Enter the state of the current department of employment.
5. Enter the zip code of the current department of employment.
6. Print the complete name of your immediate supervisor at the current department of employment.

Section D- New Certifications

1. Check the appropriate box; Yes, if you are 18 or older, No, if you are younger than 18.
2. Check the appropriate box to indicate whether or not you possess a high school diploma or General Education Diploma (GED).
3. Check the appropriate box to indicate whether or not you can read and write using the English language.
4. Check the appropriate box to indicate good moral character using the criteria described in that field.
5. Check the appropriate box to indicate if you are currently employed by a governmental agency as an inspector supervisor and are conducting inspections for no less than 4 hours each week.
6. Check the appropriate box to indicate whether or not you hold an NFPA Fire Inspector 1 certification or equivalent as determined by the Bureau of Fire Services in consultation with the State Fire Safety Board.
7. Enter your NFPA 1 Certificate Number.
8. Please remember to attach a copy of your NFPA 1 Certificate.

Section E- Recertifications

1. Confirm by checking the appropriate box that the CFI Continuing Education for has been completed and is attached to the application.
2. Confirm by checking the appropriate box that you acknowledge you understand the CE/Recertification requirements.

Section F- All Applications

1. All applications must be signed and dated.