



**International Code Council/National Association of Fire
 Equipment Distributors
 ICC/NAFED
 Application for Renewal of Certification**



Name:	
Company:	
Address1:	
Address2:	
City, State, Zip:	
Phone:	
Fax:	
Email:	
Expiration Date:	

Please verify all the information above and make any corrections in the box to the right.

Note: This application must be completed in its entirety

Your current certification expires on the date listed above. To renew your certification, a complete application, applicable fees, and documentation must be received by NAFED no later than 60 days prior to the expiration of the current certification. Applications received with less than sixty days remaining are subject to an additional fee of \$50. Fees are non-refundable, even if the application for renewal is denied. If payment by credit card or check is denied the renewal application will not be processed until proper payment is received. As per the ICC/NAFED Certification Renewal Policy, applications received after the expiration date may be processed but an additional fee will apply. If the certification has expired for more than 180 days, renewal is not allowed and the applicant will have to successfully complete the certification exam(s) to restore their certification. Exceptions are allowed for military service, jury duty, and extended medical recuperation. See ICC/NAFED's Certification Renewal Policy for details.

To obtain a three-year renewal, a minimum of one hundred Experience and Education Credits (EECs), as summarized in the ICC/NAFED Certification Renewal Policy, are required for **each discipline** of certification. EEC information must be detailed on this application form. If approved, the renewal will be valid for a three-year period and the documentation will be issued as a joint ICC/NAFED certification. The ICC/NAFED Certification Renewal Policy is available on NAFED's website at www.nafed.org.

Check the area in which the applicant is seeking certification renewal:

Portable Fire Extinguisher Technician
 # of EECs Earned: Experience _____ Training _____ Other _____ Total _____

Pre-Engineered Kitchen Fire Extinguishing System Technician
 # of EECs Earned: Experience _____ Training _____ Other _____ Total _____

Pre-Engineered Industrial Fire Extinguishing System Technician
 # of EECs Earned: Experience _____ Training _____ Other _____ Total _____

Engineered Suppression System Technician
 # of EECs Earned: Experience _____ Training _____ Other _____ Total _____

Information provided on this application must only reflect activities for the past three-year certification period. Experience and education credits earned prior to the start of the current certification are not applicable and will not be considered for this renewal.

Work Experience					
Relevant Period of Employment		Employer Name, Address, Telephone Number, and Supervisor's Name	Job Description	*Minimum 480 Hours per Year Yes/No	
From	To				

* Up to 25 credits are allowed for each 12-month period in which an applicant is actively involved in the area of their certification. To be actively involved, a participant must be engaged in activities that are directly related to the area of certification for a minimum of 480 hours (12 weeks) within the 12-month period.

Recognized Training†				
Date(s)	Course Title and Description	Organization Providing Training and Location	Instructor(s) Name(s)	*Hours of Training

† Examples of *Recognized Training* are training programs provided by manufacturers, suppliers, contract training services, government agencies, and national and local associations.

* One credit is allowed for each hour that an applicant attended and participated in a systematic training program relating to the area of certification. This training may take place at the location of employment or at other venues. The training program must be one that is organized, includes a specific training agenda, and includes a synopsis of the training.

Formal Employer Training†

Date(s)	Course Title and Description	Instructor(s) Name(s)	Location of Training	*Hours of Training

† Employer-provided training must be an organized training program that includes an agenda and attendee sign-in sheet.

* One credit is allowed for each hour that an applicant attended and participated in a systematic training program relating to the area of certification. This training may take place at the location of employment or at other venues. The training program must be one that is organized, includes a specific training agenda, and includes a synopsis of the training.

Training Program Instructor

Date(s)	Course Title and Description	Organization Endorsing Training	Location of Training	*Hours of Training

* One credit is allowed for each hour that an applicant has actively been an instructor for a training program that relates to the area of certification. This includes time instructing employees regarding issues related to the area of certification. Details of time and trainees should be maintained for auditing purposes.

Association Membership

Name of Association	Period of Membership		*EEC Earned
	From	To	

* One credit per year will be granted for active membership in local and national associations that promote the professionalism of the fire equipment industry. Such associations include the National Association of Fire Equipment Distributors (NAFED), the National Fire Protection Association (NFPA), the Society of Fire Protection Engineers (SFPE), and state and local fire- and safety-related associations.

Supporting documents may be submitted with this application. If required, additional pages may be attached.

All applications are reviewed by NAFED and will be approved, rejected, or audited. The applicant will receive a written response from NAFED. On a quarterly basis, the ICC will issue a revised certification document for all approved applications.

Let us know if you have any additional information to provide regarding this application:

A \$129.00 processing fee for each discipline of renewal must be included with the application. An additional \$50.00 fee is required for each application that is received with less than 60 days remaining or that has expired and not surpassed 180 days since the expiration.

Total Payment Included \$ _____

I attest that the information I have provided on this application is true and accurate; any false information may be cause for denial or cancellation of any certification or renewal of certification. Further, I have read, understand, and acknowledge the NAFED Certification Renewal Policy. In accordance with said policy, I am aware that my application may be subject to an audit, and if selected for an audit, I have thirty days to provide the requested information.

Applicant's Signature _____ **Date** _____

Payment Method

- CHECK ENCLOSED (payable to NAFED) VISA MASTERCARD AMERICAN EXPRESS

NAME ON CARD

ACCOUNT NUMBER

SIGNATURE

EXPIRATION DATE

Retain a copy of all forms and associated materials for your records. All fees are nonrefundable.

Return this form with payment to:
NAFED ▪ 180 N. Wabash Ave., Suite 401 ▪ Chicago, IL 60601-6274 ▪
Tel (312) 461-9600 ▪ Fax (312) 461-0777
www.nafed.org