

Instructions: Complete, sign, and submit this form to code.development@houstontx.gov.

New Registration Renewal

International Fire Code (IFC) Requirements: 510.5.3 Minimum qualifications of personnel. The minimum qualifications of the system designer and lead installation personnel shall include both of the following:

- A valid, current FCC-issued general radio operators license "GROL".
- Certification of in-building system training issued by an approved organization or approved school, or a certificate issued by the manufacturer of the equipment being installed. These qualifications shall not be required where demonstration of adequate skills and experience satisfactory to the fire code official is provided.

1. Name of firm/corporation or person. _____

2. Office street address, telephone number, and email.

_____ (_____) _____
Address Phone Number

_____ _____ _____
City State Zip Code

_____ *Email*

3. Mailing address (if different from office).

_____ *Address*

_____ _____ _____
City State Zip Code

4. Official(s) to be contacted, telephone number(s).

_____ (_____) _____
Official's Name Phone Number

_____ (_____) _____
Official's Name Phone Number

_____ (_____) _____
Official's Name Phone Number

- 5. How many years has your organization been in the ERCC business? _____
- 6. How many years has your organization been in business under its present name? _____
- 7. If a corporation,
 - (a) Date of incorporation: _____
 - (b) State of incorporation: _____
 - (c) Names of principal officers: _____

8. If an individual or a partnership, answer the following:

(a) Date of organization: _____

(b) Name and address of all partners (Indicate whether general or limited partnership).

_____	_____	<input type="checkbox"/> General <input type="checkbox"/> Limited
<i>Name</i>	<i>Address</i>	
_____	_____	<input type="checkbox"/> General <input type="checkbox"/> Limited
<i>Name</i>	<i>Address</i>	
_____	_____	<input type="checkbox"/> General <input type="checkbox"/> Limited
<i>Name</i>	<i>Address</i>	
_____	_____	<input type="checkbox"/> General <input type="checkbox"/> Limited
<i>Name</i>	<i>Address</i>	
_____	_____	<input type="checkbox"/> General <input type="checkbox"/> Limited
<i>Name</i>	<i>Address</i>	

9. List of individuals from your organization qualified in the design/installation of ERCC systems. (Use separate sheets if necessary)

- a. _____
- b. _____
- c. _____
- d. _____
- e. _____
- f. _____
- g. _____
- h. _____

10. Attach copies of FCC radio authorization and certifications of training issued by approved agencies and/or equipment manufacturer.

If certified by manufacturer, provide the manufacturer's name _____

11. List all Texas Registered Professional Engineers and their registration number.

a. _____

c. _____

b. _____

d. _____

12. Please have an official representative sign and date this form.

Official Representative Printed Name

Official Representative Personnel Signature

Date

(SEAL)