## <u>Certificate of Fitness Alternative Issuance Procedure</u> <u>S-81 DRY CHEMICAL FIRE EXTINGUISHING SYSTEMS PRINCIPAL</u>

(Used by Individual Applicants only, PRINT all information requested)

O Original (\$25)  You must upload the followings materials below while you apply online:  □ This completed and notarized affirmation form. □ All required documents listed in Section 4. □ A recommendation letter with company letterhead. □ A recent photo in JPG or JPEG format.  Please learn how to apply and pay online from the guide below: http://www1.nyc.gov/assets/fdny/downloads/pdf/business/fdny-business-cof-individuals-short.pdf  O Renewal (\$15, S-81 COF #). Only complete section 1, 2, 3, and 4. You must upload this form and all required documents listed in the Section 4. Please learn how to renew and pay online from the guide below: https://www.nyc.gov/assets/fdny/downloads/pdf/business/cof-renewal-short.pdf  O Update (\$5, S-81 COF #). Only complete section 1, 2, 3, and 4. You must upload this form and all required documents listed in the Section 4. Please learn how to update and pay online from the guide below: http://www1.nyc.gov/assets/fdny/downloads/pdf/business/cof-update-short.pdf	
SECTION 1: APPLICANT INFORMATION  First name: Last name: MI Last 4 digits of SSN: XXX-XX	
Contact phone: Email: @	
Home mailing address: City State Zipcode	
Experience in the related field: years.	
SECTION 2: DECLARATION	
<ul> <li>I,</li></ul>	
I and/or company representative(s) listed in Section 4 is thoroughly trained by the manufacturers of the fir extinguishing systems that my company will install, inspect, maintain, and test. I also understand that I am responsible to ensure all S-18 COF holders in my company are fully trained and knowledgeable of the syst that they will install, inspect, maintain, and test. I acknowledge that our company is limited to working to manufacturers listed on this application. I also acknowledge that my S-81 COF and all S-18 COF holders employed by my company are dependent upon my valid NYC DOB Master Fire Suppression Piping Control Type A or Type C License. I agree to promptly notify the FDNY COF unit if my DOB license expires or i void/suspended.	the ractor
I understand that I will be subject to all applicable penalties provided by law for a false or fraudulent submincluding suspension, revocation and/or non-renewal of this and other Certificates of Fitness pursuant to F and Fire Department rule 3 RCNY 113-01; and/or other penalties provided by law, rule or regulation with to my professional license.	FC113
I acknowledge that it is unlawful under New York State and New York City law to make a false statement Fire Department; or to give to a City employee, or for a City employee to accept, any benefit, monetary or otherwise, either as a gratuity for properly performing the job or in exchange for special consideration, included to gifts, cash, favors, meals and trips.	r
I also understand that the Fire Department reserves the right to attend any training course and/or audit recorder to monitor compliance with training requirements and the right to call up to test the applicants who a issued by AIP. Applicant who has failed the written exam will not be allowed to take advantage of this polynomial.	are licy.
On this day of, in the year, I have hereunto my signature and I certify that, subject to penalty of fine or imprisonment pursuant to the New York State Law and NYC Administrative Code §15-220.1, that the information provided is true and accurate.	
Signature of Applicant:Date:	

SECTION 3: COMPANY INF	ORMATION		
Company business name:			
NYC DOB Master Fire Suppress	ion Piping Contractor License Number:		
Company business address :	City	StateZipcode	
(Use the same business address a	as listed by the NYC DOB)		
Name of Designated FDNY Cont	act Coordinator:	; 🗆 N/A	
Email of Designated FDNY Cont	act Coordinator:@	; □ N/A	
Contact phone # of Designated F	DNY Contact Coordinator:	; □ N/A	
SECTION 4: EDUCATION, I (You must upload the copy of the license doc	ICENSE, AND EXPERIENCE REQUIR cumentation along with your application)	EMENT	
☐ Hold <b>ONE</b> of the following ce			
• 1	of Buildings Master Fire Suppression Piping of Buildings Master Fire Suppression Piping		
☐ Applicant or one company representative holds the following <b>valid</b> manufacturers' certification(s): (The following systems will be the systems that this S-81 applicant's company and its S-18 employees are allowed to install, inspect, maintain, and test.)			
☐ Amerex, certification holde	er's name: ompany representative		
☐ <b>Ansul</b> , certification holder's	s name:		
□ applicant □ another co □ <b>Buckeye</b> , certification hold	ompany representative		
□ applicant □ another co	ompany representative		
☐ <b>Kidde</b> , certification holder'	s name: ompany representative		
☐ <b>Pemall</b> , certification holder	's name:		
□ applicant □ another co	ompany representative		
□ <b>PyroChem</b> , certification ho □ applicant □ another co			
Note 1: The individual's name on the manufacturers' certification(s) should match the name listed above.  However, the company name is not required to match the S-81 holder's company name.  Note 2: If any manufacturer's certification was not issued to the S-81 applicant, a separate company letter must be uploaded. The sample letter can be found in the appendix A of this form or online:			
	fdny/downloads/pdf/business/s81-sample-designars' certification(s) and DOB license must be		
SECTION 5: RECOMMENDA		· · · · · ·	
	er of recommendation from the employer. The		
letterhead, and must state the app principal/owner of the company.	licant's full name, experience and also state t	hat this S-81 COF applicant is the	
• Sample of self-employ	ved letter:		
1 .	ets/fdny/downloads/pdf/business/cof-sample-s	selfrec-letter.pdf	
SECTION 6: PHOTO REQUI	REMENT		
A recent photo (2x2 head shot) in	JPG or JPEG format.		
SECTION 7: STATEMENTS &	& SIGNATURES		
	ound by what is stated in this application an	<u> </u>	
statements or inaccurate information. I hereby solemnly swear under oath and subject to penalty of perjury that the information provided by me in this application is true and accurate to the best of my knowledge.			
information provided by the in the	Notarization (required for individual applicant)		
Applicant's print name	State of New York, county of:	Notary Seal	
	Sworn to or affirmed under penalty of perjury		
Applicant's signature	day of 20 Notary Signature	-	
Date		_	

### Appendix A: FAQ for Alternative Fire Extinguishing Systems COFs

#### 1. When will the company list be established and provided to the public?

04/04/2023

After the FDNY receives and approves the S71, S81 and S61 applications, the FDNY will establish three company lists for three types of alternate agent fire extinguishing systems and publish them on the FDNY website for the public on **04/04/2023**. The lists will be updated every month.

Dry Chemical Fire Extinguishing List (S81):

http://www.nyc.gov/assets/fdny/downloads/pdf/business/approved-dry-chemical-systems-list.pdf

### 2. When will the FDNY start to enforce all principals to have COFs?

07/01/2023

The FDNY will start to enforce all companies' principals who install or maintain any alternate agent fire extinguishing systems must hold a valid COF. For wet chemical and dry chemical systems, the FDNY will only allow the companies to install or maintain the manufacturers that listed on the company lists.

### 3. What happen if principals do not obtain their COFs by 07/01/2023?

The FDNY personnel will use the FDNY-approved list to determine whether a company can file design and installation documents with Fire Department and/or is authorized to install or service systems from a specific manufacturer. If a company is not listed as approved for the installation and service of the particular manufacturer, then appropriate enforcement actions will be taken.

#### 4. How dry chemical fire extinguishing systems technicians apply COF?

The S18 (dry chemical) exam is still under development. The procedure will be released when the exam is ready.

# 5. Why is the FDNY requiring manufacturer's training in addition to having a COF for pre-engineering fire extinguishing systems (wet chemical and dry chemical)?

The COF study materials and the exams will only focus on the general basic requirements of Fire Code and applicable NFPA.

The pre-engineering fire extinguishing systems made by different manufacturers are usually not identical in all characteristics and each manufacturer designs equipment for use with a specific chemical. Therefore, it is critical that the applicants are thoroughly trained and be familiar with the latest manufacturer's manual before they serve any pre-engineering fire extinguishing system.

## 6. Can the technicians take the exams before he/she receives all required manufacturer's or company internal trainings?

Yes. However, the company letter must be submitted stating that the technician will be assigned work for the installation and/or maintenance of the systems for which appropriate training was received.

### Appendix B:

## ---Sample Company Designate Letter (S81)---

## COMPANY NAME BUSINESS ADDRESS

Fire Department Bureau of Fire Prevention 9 Metro Tech Center Brooklyn, NY 11201
To whom it may concern:
The purpose of this letter is to document that (Name of the company representative who
received the manufacturers' certification(s)) is currently employed by (Name and address of
company). (Name of the company representative) has received comprehensive training(s) in
installing, inspecting, maintaining, and testing of the following system(s) and the manufacturers' certification(s) are also
uploaded:
(e.g. ABC dry chemical system)
(e.g. 7150 dry chemical system)
<del></del>
The trainings followed the manufacturers' recommendations which covered the entire instruction manual, hands-on training as well as incorporated safety and emergency shutdown procedures for the system(s).
This company representative will be responsible to train our principal and all company technicians who will install, inspect, maintain, or test the systems listed above.
We also understand that if this representative leaves our company, we must notify the FDNY COF unit via emailing <a href="mailto:pubcert@fdny.nyc.gov">pubcert@fdny.nyc.gov</a> and provide new manufacturers' certifications and company representative letter.
(Printed name of Employer) (Employer's title) (Signature of Employer)

NOTE: The recommendation letter should be on employer's letterhead. If not on employer's letterhead, signature must be notarized.