



OFFICE OF INSURANCE AND SAFETY FIRE COMMISSIONER

COMMISSIONER OF INSURANCE • INDUSTRIAL LOAN COMMISSIONER • SAFETY FIRE COMMISSIONER

Ralph T. Hudgens, Commissioner

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www.oci.ga.gov

**SPRINKLER CONTRACTOR'S CERTIFICATE OF COMPETENCY
SITE SUPERVISION FORM**

SAFETY FIRE
ENGINEERING &
INSPECTION
GID-352-SF AUG2012

Facility Name: _____

Project Name: _____

Physical Address: _____

City: _____ County: _____ Zip: _____

Sprinkler Contractor's Name (Print): _____

Certificate of Competency's or Designee's Printed Name: _____

Certificate of Competency's or Designee's Signature: _____

Certificate of Competency's State License Number: _____

Site Visit Number (1st, 2nd, 3rd, etc.): _____

Total Visits to Date _____

Date of Visit _____

Owner/Owner's Representative/General Contractor/
Representative's Name (Print): _____

Company Name (Print): _____

Signature: _____

Type of System(s) (Wet, Dry, etc.): _____

NFPA Standards System(s) was designed by: _____

Upon project completion, the Certificate of Competency Holder affirms the installation meets or exceeds all requirements of the Safety Fire Commissioner's Rules and Regulations 120-3-3. This shall be signed by the Certificate of Competency Holder, only.

C of C's Signature: _____ Date: _____