

BOARD OF RULES AND APPEALS

Certification Form for Position of

Fire Code Official / Fire Marshal / Fire Code Manager - Administrator

For Fire Department of: _____

Name: _____

Home _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____ Email _____

Date of Birth: _____ Drivers License #: _____

The undersigned makes application for certification, and vouches for the truth and accuracy of all statements and answers herein contained

Signature of Applicant: _____ Date Signed: _____

F-103.1 Appointment of Fire Marshal/~~or~~ Fire Code Official: There shall be appointed by the Fire Chief certain fire prevention personnel to be qualified as set forth in this Chapter as part of FFPC to ~~serve~~ qualified as Fire Marshal / Fire Code Official. Personnel assigned to the bureau as Fire Marshal / Fire Code Official / Fire Code Manager, Fire Plans Examiner, and/ or Fire Inspectors shall be State Certified Firefighters, State Certified Fire Inspectors, and certified by BORA. For state certification and recertification refer to Florida State Statute 633.

Exception: At Fire Chief's discretion, a person may be given up to eighteen (18) months to become a Florida Certified Firefighter, from the date of hire.

F- 103.3 Certification of Fire Marshal/Fire Code Official. The Fire Marshal/Fire Code Official shall be certified by BORA and shall meet one or more of the following qualifications:

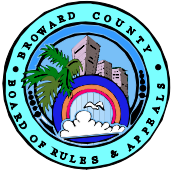
F-103.3.1 An Engineer and/or a Degree in Fire Science and/or a Degree in Fire Prevention and shall have been certified as County Fire Inspector for three (3) years.

F-103.3.2 A County Certified Fire Plans Examiner with at least five (5) years of experience within the jurisdiction of FFPC.

F-103.3.3 Ten (10) years' experience as a Fire Inspector, with at least five (5) years of experience which shall have been within the jurisdiction of FFPC and shall be a Broward County and State of Florida Certified Fire Inspector.

F-103.3.4 Have been fulfilling the duties of a Fire Marshal/Fire Code Official with five years continuous service as such.

F-103.3.5 Possesses a certification issued by the State Fire Marshal as a Fire Code Manager/Administrator in accordance with NFPA 1037 with a total of six (6) years' experience as an fire plans examiner and inspector in Florida



BROWARD COUNTY

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Note: All applications shall include the required information in the following order. Failure to include these items shall be cause for rejection.

1. COPY OF CURRENT STATE FIRE FIGHTER CERTIFICATION
2. COPY OF CURRENT STATE FIRE INSPECTOR CERTIFICATION
3. COPY OF YOUR PASSING LETTER FROM THE **BROWARD COUNTY** BOARD OF RULES AND APPEALS TEST.
4. **A CLEAR COPY OF A CURRENT PHOTO ID**
5. A RÉSUMÉ INDICATING ALL EDUCATION AND WORK EXPERIENCE
6. **Individuals being considered for appointment will be required to complete an affidavit of compliance with 71-575 (see Board policy 14-02)**

The undersigned makes application for certification and indicates compliance with aforementioned Code Sections and vouches for the truth and accuracy of all statements and answers herein contained by affixing his/her signature below.

Printed name and Signature of Applicant.

State of Florida |
County of Broward | SS

On the _____ day of _____, 20____, personally appeared before me the above named individual who signed the foregoing instrument declaring same to be true to his knowledge and belief.

Notary-Public _____

My Commission Expires _____

Fire Chief: _____

I certify that I have verified that the above named applicant meets all the requirements for this position in accordance with the Florida Fire Prevention Code and the Local Fire Amendments as applicable to Broward County.

State of Florida |
County of Broward | SS

On the _____ day of _____, 20____, personally appeared before me the above named individual who signed the foregoing instrument declaring same to be true to his knowledge and belief.

Notary- Public _____

My Commission Expires: _____

Note: The Broward County Board of Rules & Appeals has the authority to request additional information if necessary.

Approved: _____ **Date:** _____
Chief Code Compliance Officer

Disapproved: _____ **Date:** _____
Chief Code Compliance Officer

Approved by BORA on the _____ **day of** _____, **20** _____

Subject: Policy/Affidavit to ensure compliance with Chapter 71-575, paragraph 4(b), Laws of Florida

POLICY/AFFIDAVIT

The requirements below have been adopted by vote of the Broward County Board of Rules and Appeals on April 10, 2014, to help ensure compliance with Chapter 71-575, paragraph 4(b), Laws of Florida.

NOTICE

All applicants for certification or re-certification are required to execute the following statement and to have same notarized by a duly authorized Notary. Failure to execute and have this statement notarized will prevent the certification / re-certification process from proceeding to completion.

THE UNDERSIGNED HEREBY VOLUNTARILY AND KNOWINGLY STATES AS FOLLOWS:

The undersigned has read Chapter 71-575, paragraph 4(b), Laws of Florida and has had the opportunity to have same reviewed and explained by legal counsel. Undersigned understands the terms of same and that any Inspector (such as and including but not limited to structural, engineering, plumbing, mechanical, or electrical) or other building official charged with enforcing or otherwise supervising or inspecting any work covered under any section of the Florida Building Code as applicable to Broward County pursuant to Chapter 71-575, Laws of Florida, and who is required to hold or who otherwise holds a Certificate of Competency in any area of construction shall not use his/her Certificate of Competency to engage in free enterprise thereby, competing against persons or firms that may do business within Broward County whose work he/she may also inspect, nor may he/she allow his/her Certificate of Competency to be used by another person or firm. This includes any activity, such as, but not limited to bidding, contracting, code consulting, design, employment, plan review, special building inspections, etc., regardless of compensation. The undersigned makes application for certification or re-certification, affirms compliance with aforementioned Code Section, and vouches for the truth and accuracy of all statements and answers herein contained by affixing his/her signature below. The undersigned agrees that failure to comply with the requirements of chapter 71-575 shall be considered a material breach of the terms of certification and may result in decertification/ denial of certification.

A copy of a legal opinion with respect to Chapter 71-575 is available upon request.

Printed Name and Signature of Applicant.

State of Florida

SS |

County of Broward

On the _____ day of _____, 20____, personally appeared before me the above named individual who signed the foregoing instrument declaring same to be true to his knowledge and belief.

Notary-Public: _____

(Printed name and Signature of Notary Public, State of Florida)

(NOTARY SEAL)

Personally Known _____ OR Produced Identification _____

Type of Identification Produced _____

Editor's Note: Affidavit Authorized by BORA vote on May 8, 2014, and issued by Chair on May 9, 2014.