

**MEMORANDUM**

**TO: MISSISSIPPI ELECTRONIC PROTECTION  
LICENSE APPLICANTS**

**FROM: STATE FIRE MARSHAL'S OFFICE**

**DATE: JULY 1, 2014**

**RE: LICENSE APPLICATION**

The Mississippi Electronic Protection Division of the State Fire Marshal's Office has been established in order to implement Senate Bill 2697. The purpose of Regulation EP-2006-1 is to license individuals and companies which offer electronic protective systems, burglar alarm systems, closed circuit television alarm systems, or services to such alarms or systems to the public.

**Application(s) and the Mississippi Electronic Protection Licensing Act Rules and Regulations can be accessed through the Mississippi Insurance Department web site: [www.mid.ms.gov](http://www.mid.ms.gov)**

Application (s), fees and required documentation must be submitted to the Electronic Protection Division of the State Fire Marshal's Office, P.O. Box 79, Jackson, MS 39205. Please use a separate application form for each license class.

**NOTICE: A \$50.00 FINGERPRINT PROCCESING FEE IS REQUIRED ON ALL NEW APPLICATIONS**

Documentation requirements are as follows:

- Class A**
1. Documentation that the company is an entity duly authorized to conduct business within this state.
  2. Documentation that the company has a valid location within the Mississippi State lines.
  3. Documentation that the company holds a general liability and errors and omissions insurance policy, or a surety bond, in an amount not less than Three Hundred Thousand Dollars (\$300,000).
  4. Documentation that the company carries current and valid workers' compensation insurance policy as required by state law.
  5. Documentation that one (1) employee for the company holds a Class- B license at each operating location.

***Class A: License Fee \$450.00***

***Renewal: Renewal Fee \$200.00***

- Class B**
1. Documentation that the applicant has successfully completed a minimum of National Burglar and Fire Alarm Association, Level 2 A&B Burglar Alarm training course or equivalent training approved by the State Fire Marshal.
  2. Two (2) passport size photographs of the applicant.
  3. Applicant shall be fingerprinted at the State Fire Marshal's Office.

**Class B: License Fee \$150.00**

**Renewal: Renewal Fee \$50.00**

- Class C**
1. Documentation that the applicant has successfully completed a minimum of National Burglar and Fire Alarm Association, Level 1 Burglar Alarm training course, or equivalent training approved by the State Fire Marshal.
  2. Two (2) passport size photographs of the applicant.
  3. Applicant shall be fingerprinted at the State Fire Marshal's Office.

**Class C: License Fee \$150.00**

**Renewal: Renewal Fee \$50.00**

- Class D**
1. Documentation that the applicant has successfully completed a minimum of National Burglar and Fire Alarm Association, Sales Understanding Alarms training course, or equivalent training approved by the State Fire Marshal or minimum of two (2) years of design and sales experience in the alarm industry attested to in a notarized affidavit and payroll records provided by the applicant.
  2. Two (2) passport size photographs of the applicant.
  3. Applicant shall be fingerprinted at the State Fire Marshal's Office.

**Class D: License Fee \$150.00**

**Renewal: Renewal Fee \$50.00**

- Class H**
1. Letter from the Supervisor stating that they are to only be a helper (cable puller, gopher, assistant).
  2. Two (2) passport size photographs of the applicant.
  3. Applicant shall be fingerprinted at the State Fire Marshal's Office.

**Class H: License Fee \$150.00**

**Renewal: Renewal Fee \$50.00**

**License Upgrade: \$50.00**

**Duplicate License: \$20.00**



Mississippi Insurance Department  
 Post Office Box 79  
 Jackson, MS 39205

Office of the State Fire Marshal  
 Phone (601) 359-1061  
 Fax (601) 359-1076



### MISSISSIPPI ELECTRONIC PROTECTION LICENSE APPLICATION

What type of license are you applying for?  Initial  Fingerprints  Renewal  Revision  Duplicate  Upgrade

LICENSE NUMBER:  (Does not apply to initial license)

CHECK ONE	TYPE OF LICENSE	LICENSE FEE	RENEWAL FEE	DUPLICATE FEE	UPGRADE FEE	FINGERPRINT PROCESSING FEE
<input type="checkbox"/>	CLASS A - Contracting Company	\$450.00	\$200.00	\$20.00		
<input type="checkbox"/>	CLASS B - System Technician	\$150.00	\$50.00	\$20.00		\$50.00
<input type="checkbox"/>	CLASS C - System Installer	\$150.00	\$50.00	\$20.00	\$50.00	\$50.00
<input type="checkbox"/>	CLASS D - System Salesperson	\$150.00	\$50.00	\$20.00	\$50.00	\$50.00
<input type="checkbox"/>	CLASS H - Helper	\$150.00	\$50.00	\$20.00	\$50.00	\$50.00

#### TO BE COMPLETED BY CLASS -A (CONTRACTING COMPANY)

Company Name:		
Company license number: (Does not apply to initial license)		
Mailing Address:		
City:	State:	Zip Code:
Physical Address: (If different from mailing)		
City:	State:	Zip Code:
Phone Number:	County:	
Owner's Name:		
Federal Tax Identification Number or Social Security Number:		
Name of Designated Agent:		
Web Site Address:	E-Mail Address:	
Names of Each Company Providing Monitoring Services		

**TO BE COMPLETED BY CLASS-B, C, D & H**

<b>Last Name:</b>		<b>First &amp; Middle Name:</b>		<b>Phone:</b>	
<b>Mailing Address:</b>					
<b>City:</b>		<b>State:</b>	<b>Zip Code:</b>	<b>E-mail Address:</b>	
<b>Physical Address: (If different from mailing):</b>					
<b>City:</b>		<b>State:</b>		<b>Zip Code:</b>	
<b>County:</b>	<b>Driver's License Number and State</b>		<b>Social Security Number:</b>	<b>Date of Birth:</b>	
<b>Weight:</b>	<b>Height:</b>	<b>Sex:</b>	<b>Color of Hair:</b>	<b>Color of Eyes:</b>	
<b>Name, License # and Address of Contracting Company (Employer):</b>					

**TO BE COMPLETED BY CLASS A, B, C, D & H**

**Has all documentation required by the Mississippi Electronic Protection Licensing Act Rules and Regulations been submitted with this application?    Yes  No**

**Has the applicant been convicted of a felony, entered a plea of guilty or nolo contendere to a felony charge, or received a first-time offender pardon? For purposes of this question, applicant is an officer or principal of company applying for Class A license or individual applying for Class B, C, D & H license.    Yes  No**   
**(If you answered yes, a copy of court documents must be attached).**

**I hereby certify that, under penalty of perjury, all of the information submitted in this application and attachments is true and complete. I authorize the State Fire Marshal to order fingerprints analysis, any other analysis or documents deemed necessary by the State Fire Marshal for verifying my criminal history. It is understood and agreed that said license, if issued, may be revoked by competent authority as provided by law.**

**Name of Applicant:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

\_\_\_\_\_

**STATE OF** \_\_\_\_\_ **COUNTY OF** \_\_\_\_\_

**Sworn to and subscribed before me this** \_\_\_\_\_ **day of** \_\_\_\_\_ **, A.D., 20** \_\_\_\_.

\_\_\_\_\_  
**Notary Public**