



# State Fire Marshal's Office

PO Box 12107 | Austin, TX 78711 | 512-676-6800 | tdi.texas.gov/fire

SF247 | 0126

## Fire Alarm Instructor Approval Application

### Instructions

- **Application fee: \$50** (TDI code 572).
- Print or type your information.
- Include all documents and information required by [Chapter 6002 of the Texas Insurance Code \(TIC\)](#) and [Section 34.600 of the Texas Administrative Code \(TAC\), Title 28, the Fire Alarm Rules](#).
- You must carry this approval while teaching at an approved training school.
- You must keep the State Fire Marshal's Office (SFMO) informed of your current mailing address.
  - If you change addresses, notify SFMO in writing. We will issue a new approval after we get your change of address notice and the required fee.
- All fees are nonrefundable, except for overpayments from mistakes of law or fact.
- Send one payment to cover fees. Payments for various applications must be combined.
- Answer questions completely and truthfully. We may deny, suspend, or revoke your license if you misrepresent or knowingly give wrong information on this application.

### 1. Applicant information

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First name	Middle name	Last name	Suffix
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Mailing address

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City	State	ZIP	County
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Current license number (APS, RAS, or FAL) Required for this approval.	Phone
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Email (Required)

## 2. Military service (mark one)

Are you an active military service member, retired military service member, or a spouse of an active military service member?

Yes  No

If yes, complete the [SF265 - Licensing Fee Exemption Application for Military Service](#) form (PDF).

## 3. Question

Have you held a Fire Alarm Planning Superintendent (APS), Residential Fire Alarm Superintendent (RAS), or Fire Alarm Technician (FAL) license issued by the Texas State Fire Marshal's Office for a minimum of three years?

Yes  No

If **no**, provide written documentation showing proof of a minimum of three years of experience in the installation, servicing, or monitoring of fire alarm systems.

## 4. Certification

- I certify that I will comply with Chapter 6002 of the TIC and Section 34.600 of TAC, Title 28, the Fire Alarm Rules.
- I verify that the information on this application and its attachments are true and correct.
- I understand that knowingly providing a false answer to any question or submitting false information or documents with this application may be tampering with a governmental record, which is punishable under the Texas Penal Code, Section 37.10.

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Applicant signature

Date

## 5. Payment

Pay by cashier's check or money order payable to the Texas Department of Insurance. Mail your completed application, additional documents, and payment to the following mailing address:

State Fire Marshal's Office  
PO Box 12107  
Austin, Texas 78711-2107

## Your rights

You can request information we have about you by emailing [OpenRecords@tdi.texas.gov](mailto:OpenRecords@tdi.texas.gov) or writing to: Public Information Coordinator, Texas Department of Insurance, PO Box 12030 (mail code GC-ORO) Austin, Texas 78711-2030. You also have the right to ask that we fix information we have about you that is wrong. To ask for a correction, send (1) your name, mailing address, and your phone number, (2) details about what needs to be fixed, and (3) the reason or proof showing why the information is wrong. Send this by email to [RecordCorrections@tdi.texas.gov](mailto:RecordCorrections@tdi.texas.gov) or by mail to: Record Correction Request, Texas Department of Insurance, PO Box 12030 (mail code CO-AAL-CC), Austin, Texas 78711-2030. There is a different process to change or update information you submitted to the State Fire Marshall's Office (SFMO). To update information submitted to SFMO, email [FMLicensing@tdi.texas.gov](mailto:FMLicensing@tdi.texas.gov). There may be a fee to update information held by SFMO.