

# CERTIFIED FIRE INSPECTOR II RETEST APPLICATION

Send completed application to:  
NFPA Certification Department  
1 Batterymarch Park, Quincy, Ma 02169  
(P) 617-984-7497 (F) 617-984-7127  
Email: [cfi@nfpa.org](mailto:cfi@nfpa.org)  
Web Page: [www.nfpa.org/certification](http://www.nfpa.org/certification)



## For Internal Use Only

Date Received: \_\_\_\_\_  
Database: \_\_\_\_\_  
Payment Rcvd: \_\_\_\_\_

**(TYPE OR PRINT ALL INFORMATION; INCOMPLETE APPLICATIONS WILL BE RETURNED)**

Date of Retest Exam: \_\_\_\_\_  
Test Site: (Name) \_\_\_\_\_  
(Address) \_\_\_\_\_  
Proctor's Name: \_\_\_\_\_  
Ship Exam to: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
Exams are shipped UPS  
can not ship to a P.O. Box # \_\_\_\_\_  
Proctor Phone: \_\_\_\_\_  
Proctor Email: \_\_\_\_\_  
Proctor Fax: \_\_\_\_\_

APPLICANT NAME

Please allow at least three weeks from date of request and exam date. Exam confirmation and Proctor Agreement will be emailed to proctor within 72 hours of exam request. If confirmation and Proctor Agreement are not received, please contact the NFPA Certification Department.

**The Written Examinations will be shipped to the Proctor approximately 48 hours prior to the scheduled exam. If the Written Examinations have not been received within this timeframe, please contact the NFPA Certification Department immediately.**

Exams will only be sent for those individuals who are actively enrolled in the NFPA CFI-II Program. For your convenience, you may fax the exam scheduling form to NFPA's Certification Department at 617-984-7127.

*NOTE: Any Testing Center Fee is the responsibility of the individual applicant.*

## APPLICANT NOTIFICATION ADDRESS

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## The following fee is attached:

- US \$ 75.00 Retest Fee  
 Check. *(Please make checks payable to NFPA Certification Department)*  
 Purchase Order PO# \_\_\_\_\_ *(Please enclose copy of PO)*  
 Credit Card:  MasterCard  VISA  Discover  American Express

Credit Card #: \_\_\_\_\_ Card Exp. Date: \_\_\_\_\_

Name on Card: \_\_\_\_\_ Signature: \_\_\_\_\_