



**VERMONT DEPARTMENT OF PUBLIC SAFETY**  
**DIVISION OF FIRE SAFETY**  
 Office of the State Fire Marshal, State Fire Academy and State HAZMAT Team  
[firesafety.vermont.gov](http://firesafety.vermont.gov)



## Sticker Request Form

Return this completed form to the appropriate Regional Office

**Barre Regional Office**

1311 US RTE 302, Suite 500  
 Barre, VT 05641  
 Phone: (802) 479-4434  
 Fax: (802) 479-4446

**Rutland Regional Office**

56 Howe Street, Building A, Suite 200  
 Rutland, VT 05701  
 Phone: (802) 786-5867  
 Fax: (802) 786-5872

**Springfield Regional Office**

100 Mineral Street, Suite 307  
 Springfield, VT 05156  
 Phone: (802) 885-8883  
 Fax: (802) 885-8885

**Williston Regional Office**

380 Hurricane Lane, Suite 101  
 Williston, VT 05495  
 Phone: (802) 879-2300  
 Fax: (802) 879-2312

**Quantity:**

- \_\_\_\_\_ TQP Stickers (Fire Alarm, Suppression, Sprinkler, Generator) – \$30.00 each
- \_\_\_\_\_ System ID Stickers (Fire Alarm, Suppression, Sprinkler, Generator) – NO COST
- \_\_\_\_\_ Conveyance (Elevator or Platform Lift) Stickers – \$25.00 each
- \_\_\_\_\_ Boiler/Pressure Vessel Stickers – \$30.00 each

| <b>*Office Use Only*</b> |  |
|--------------------------|--|
| Sticker Numbers Issued:  |  |
| TQP                      |  |
| Sys ID                   |  |
| Conv.                    |  |
| B/PV                     |  |

**Mail to:**

Name/Company: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Licensee/Certificate holder:**

Signature of Inspector: \_\_\_\_\_  
 Inspector Name (print): \_\_\_\_\_  
 Company: \_\_\_\_\_  
 License/Certification Number: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 E-mail (optional): \_\_\_\_\_

**\*All the above information is required for processing, incomplete requested will not be fulfilled.  
 Please complete for each sticker order\***

**Returns/Exchanges**

Please note that prior year exchanges/returns will only be accepted until February 1 and a maximum of 25 stickers will be granted

| <b>*OFFICE USE ONLY*</b> |          |             |         |
|--------------------------|----------|-------------|---------|
| Received Date:           | Check #: | Check From: | Amount: |