



500 James Robertson Parkway, 10<sup>th</sup> Floor  
 Nashville, TN 37243  
 Tel: 615-741-2981  
<http://www.tn.gov/commerce/>

FOR OFFICE USE ONLY

LICENSE TYPE   
 TRANSACTION TYPE   
 FILE NUMBER \_\_\_\_\_  
 ENTITY NUMBER \_\_\_\_\_  
 APPLICATION NUMBER \_\_\_\_\_  
 AMOUNT PAID \_\_\_\_\_

Name  
 Street Address  
 City, TN Zip

Date:

Firm on File: \_\_\_\_\_ (Supporting License Number)

## LICENSE RENEWAL NOTICE FIRE EXTINGUISHER SPECIALIST

**THIS IS THE ONLY RENEWAL NOTICE YOU WILL RECEIVE.**

Failure to complete each step outlined below will result in delayed processing and possible expiration of your license. This form is to be used for renewals only. New applicants must submit a separate application form.

**RENEW ONLINE AT <https://core.tn.gov> OR MAIL THE RENEWAL FORM AND PAYMENT AT LEAST TWENTY ONE (21) BUSINESS DAYS IN ADVANCE OF THE EXPIRATION DATE. RENEWALS RECEIVED BETWEEN NINETY (90) DAYS AND TWO (2) YEARS FROM THE EXPIRATION DATE WILL BE SUBJECT TO A LATE FEE. RENEWALS RECEIVED TWO (2) YEARS AFTER THE EXPIRATION DATE WILL NOT BE PROCESSED AND THE REGISTRATION WILL EXPIRE.**

Expiration Date:	Renewal Fee: \$ 50	If submitted up to ninety (90) days after expiration: \$75. If submitted ninety-one (91) days to two (2) years after expiration: \$100.
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<p><b>Step 1:</b> If your mailing or home address has changed, enter it in the space below:</p> <p><b>Mailing:</b></p> <p>_____</p> <p><b>Home:</b></p> <p>_____</p> <p><b>Phone #:</b></p> <p>_____</p> <p><b>E-mail:</b></p> <p>_____</p>	<p><b>Step 2:</b> If your firm is not the one listed above, enter the new firm and file number below (see note):</p> <p>Firm: _____</p> <p>File Number: _____</p> <p><b>Step 3:</b> Mail this form with a check made payable to the Department of Commerce and Insurance.</p>
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I hereby certify I have read and understand the provisions of law relating to the Fire Extinguisher program. This application is made in good faith, and the answers and statements made herein are full, correct and true to the best of my knowledge. I understand that any and all information herein required by the Fire Extinguisher program is considered part of my application.

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