

Wisconsin Department of Safety and Professional Services

Office Location: 4822 Madison Yards Way
Madison, WI 53705
Phone Number: (608) 266-2112

LicensE Portal: [License.wi.gov](https://license.wi.gov)
Email: dsps@wisconsin.gov
Website: <http://dsps.wi.gov>

DIVISION OF PROFESSIONAL CREDENTIAL PROCESSING

AUTOMATIC FIRE SPRINKLER TESTER REGISTRATION APPLICATION INFORMATION

Requirements for Credential

Per [Wis. Admin. Code § SPS 305.50](#), pursuant to [Wis. Stat. §§ 145.15 \(4\), 145.165 and 145.175](#), no person may install, maintain or repair automatic fire sprinkler systems unless the person holds a license or registration issued by the Department as a licensed Automatic Fire Sprinkler Contractor, a licensed Journeyman Sprinkler Fitter, a registered Automatic Fire Sprinkler System Apprentice, a registered Automatic Fire Sprinkler Contractor Maintenance, or a registered Automatic Fire Sprinkler Fitter Maintenance. A credential is not required if a person is repairing, replacing, or maintaining electrical supervisory devices for existing automatic fire sprinkler systems.

No person may conduct the annual activities relative to inspection and testing of an existing automatic fire sprinkler system and components as required by [Wis. Admin. Code ch. SPS 314](#) unless the person holds a license or registration issued by the Department as a licensed Automatic Fire Sprinkler Contractor, a licensed Journeyman Sprinkler Fitter, a registered Automatic Fire Sprinkler System Apprentice, a registered Automatic Fire Sprinkler Contractor Maintenance, a registered Automatic Fire Sprinkler Fitter Maintenance or a registered Automatic Fire Sprinkler System Tester or a registered Automatic Fire Sprinkler System Tester Learner.

Per [Wis. Admin. Code § SPS 305.56](#), a person who holds a registration issued by the Department as a registered Automatic Fire Sprinkler System Tester may conduct the annual activities relative to inspection and testing of an existing automatic fire sprinkler system and components as required by [Wis. Admin. Code ch. SPS 314](#) and NFPA 25.

AN APPLICATION IS NOT COMPLETE UNTIL ALL OF THE FOLLOWING DOCUMENTS HAVE BEEN RECEIVED:

1. **Application and Fees:** Apply and pay fees online in LicensE, <https://license.wi.gov>. Fees will be calculated in LicensE. If needed, you can save your application and complete it later and submit it at that time. **NOTE:** If DSPS requests additional documents they must be uploaded within three (3) months from the date it was requested. Failure to do so may result in having to submit a new application and pay fees.
2. **Certification or Experience:** A person applying for an Automatic Fire Sprinkler System Tester registration examination shall have completed **one** of the following:
 - a. **Certification:** Hold a level II certification in the inspection and testing of water based automatic fire sprinkler systems from the National Institute for Certification in Engineering Technologies (NICET). **Upload** a copy of the certification.
 - b. **Experience:** At least 1,500 hours of automatic fire sprinkler system testing as a registered Automatic Fire Sprinkler System Tester Learner for at least 18 months. **Complete** the Experience Table (Form 3117T) on the next page and upload it to your LicensE account. **Upload** a copy of transcripts, if applicable.
3. **Examination:** You will be made eligible to test after your application has been submitted and reviewed. If additional documents are required you will be made eligible to test after all documentation has been received and reviewed. A communication will be sent once you are made eligible to test. Please check your "junk" or "spam" email folders. You can also check the status of your application by entering your Preliminary Application Number (PAR) at <https://license.wi.gov/s/application-status-lookup>. If you fail an exam, you must login to License, <https://license.wi.gov>, and pay another exam fee.

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DIVISION OF PROFESSIONAL CREDENTIAL PROCESSING AUTOMATIC SPRINKLER TESTER EXPERIENCE FORM (3117T)

APPLICANT Complete the applicant section of the form. Obtain the required signatures in the Experience Table then upload the completed form into your LicenseE account, https://license.wi.gov/ .			
Last Name	First Name	MI	Former/Maiden Name(s)
This form is required for applicants for Automatic Fire Sprinkler Tester Registration. See page i of Form 3117 for further information.			Application Number
			PAR-

EXPERIENCE TABLE (Upload additional sheets if needed.)			
1.	Name of Witness		WI License #
	Start (Month/Year): ____ / ____ / ____	End (Month/Year): ____ / ____ / ____	Hours: _____
	Signature of Witness/School (If unable to provide a digital signature print and sign form.)	Date	Witness Phone Number
		__ / __ / ____	____ - ____ - ____
2.	Name of Witness		WI License #
	Start (Month/Year): ____ / ____ / ____	End (Month/Year): ____ / ____ / ____	Hours: _____
	Signature of Witness/School (If unable to provide a digital signature print and sign form.)	Date	Witness Phone Number
		__ / __ / ____	____ - ____ - ____
3.	Name of Witness		WI License #
	Start (Month/Year): ____ / ____ / ____	End (Month/Year): ____ / ____ / ____	Hours: _____
	Signature of Witness/School (If unable to provide a digital signature print and sign form.)	Date	Witness Phone Number
		__ / __ / ____	____ - ____ - ____
4.	Name of Witness		WI License #
	Start (Month/Year): ____ / ____ / ____	End (Month/Year): ____ / ____ / ____	Hours: _____
	Signature of Witness/School (If unable to provide a digital signature print and sign form.)	Date	Witness Phone Number
		__ / __ / ____	____ - ____ - ____
5.	Name of Witness		WI License #
	Start (Month/Year): ____ / ____ / ____	End (Month/Year): ____ / ____ / ____	Hours: _____
	Signature of Witness/School (If unable to provide a digital signature print and sign form.)	Date	Witness Phone Number
		__ / __ / ____	____ - ____ - ____