



Claremont Fire Department
Fire Prevention Office
100 Broad Street
Claremont, New Hampshire 03743
Ph: (603) 542-7012
Fax: (603) 542-7028
Email: cfdcode@claremontnh.com

Appendix D Municipal Fire Alarm Radio Box System Application for Installation Certification

Applicant Name: _____

Company: _____

Mailing Address: _____

City, State, Zip: _____

Business Phone: _____ Cell Phone: _____

Email: _____

Today's Date: _____

Please provide the following information:

Are you an authorized AES equipment dealer? **Yes** **No**

- Attach a copy of your Certificate of Completion from AES IntelliNet training
- Attach documentation showing past experience with AES IntelliNet installation work. (Ex. of documentation include: material invoices from AES, invoices of completed work etc.)
- Attach a reference from an AES IntelliNet system administrator or contact person

This application and all required documentation should be submitted to Capt. Bryan Burr as listed above.

FOR DEPARTMENT USE ONLY			
Approved	Denied	By	Date