

CMM Supplemental Application



Fire Prevention

		on Specialist	Certificate/Transcript
(1.	Inspector -	NFPA 1031 Level I & 1 of the 5 OFC courses. (Legislation (Online Self Directed), NFPA 472 or NFPA 1072 Hazardous Mate Awareness, Fire Code Div. B Part 2 & 6 Fire Safety & Fire Protect	Attached rial
ONE		Equipment, Courtroom Procedures, Fire Code Div. B Part 9 Retro	
2.	Public Educ	ator - NFPA 1035 Level I & Public Information Officer	
3.	Plans Exami	ner - Qualified for Bill 24 (Provincial BCIN Exam)	
4.	Fire Investig	ator - NFPA 1033	
<u>отн</u> { 5.	seminars, syr	And ention/Public Education Officer Seminar (4 days) or professi mposiums or conferences (total of 24 hours, ie OMFPOA, OAFC	C, NFPA)
6.	Employment	Experience <u>5 years</u> (9,100 hours) in Fire Prevention Divis	ion
		Employer:	
		Employer:	
ocumented: in	nclude copies of certi	ficates/diplomas, agendas/transcripts where possible with CMM Application	** Provide detail if additional positions
3. <u>Fir</u>	<u>re Preventio</u>	on Professional	Certificate/Transcript
_1.	Fire Preven	tion Officer Certification (Ontario Fire Marshal)	Attached
2.	NFPA 1031 L	evel II	
3.	NFPA 1035	Level II and TAPP-C	
4.		omas/Certification Equivalent by the OMFPOA Evaluation Committee)	
		<u>And</u>	
5.		niversity Courses (with at least <u>one</u> in Local Gov't, Management, <u>and</u> one job related elective)	
<u>ALL</u> 6.		ention/Public Education Officer Seminars (8 days) ly related seminars (total 48 hours ie <mark>OMFPOA</mark> , OAFC, NFPA, IAF	C) 🗆
7.	Employment	Experience 8 years (14,560 hours) in a Fire Prevention Div	vision Supervisory Role
tle:		Employer:	_ (MM/YY): to
tle:		Employer:	_ (MM/YY): to**
ocumented: in	nclude copies of certi	ficates/diplomas, agendas/transcripts where possible with CMM Application	** Provide detail if additional positions
		New applicants must attach their CMM Applicati Complete all sections for accurate evaluation	on 🛑
1.	Applicant:	Employer:	
2.	Phone:	E-mail:	
3.	Signature: Date:		
4.	OMFPOA	Member ☐ Yes ☐ No **OMFPOA Me	mbership Required to Apply**
5.	Witness:	a) Municipal Fire Official (OMFPOA Member):	
		b) Signature: Title:	
		*Witness identity only - not verification of content.	

After application processing, invoices will be sent by email.

Payment may be made by cheque, EFT or online through the link provided on the invoice.