



CMM Supplemental Application

Fire Prevention



A. Fire Prevention Specialist

ONE

- 1. **Inspector** - NFPA 1031 Level I & 1 of the 5 OFC courses. (Legislation (Online Self Directed), NFPA 472 or NFPA 1072 Hazardous Material Awareness, Fire Code Div. B Part 2 & 6 Fire Safety & Fire Protection Equipment, Courtroom Procedures, Fire Code Div. B Part 9 Retrofit)
- 2. **Public Educator** - NFPA 1035 Level I & Public Information Officer
- 3. **Plans Examiner** - Qualified for Bill 24 (Provincial BCIN Exam)
- 4. **Fire Investigator** - NFPA 1033

Certificate/Transcript Attached

And

BOTH

- 5. 1 x Fire Prevention/Public Education Officer Seminar (4 days) or professionally related seminars, symposiums or conferences (total of 24 hours, ie **OMFPOA**, OAF, NFPA)
- 6. **Employment Experience** 5 years (9,100 hours) in Fire Prevention Division

Title: _____ Employer: _____ (MM/YY): _____ to _____

Title: _____ Employer: _____ (MM/YY): _____ to _____ **

* Documented: include copies of certificates/diplomas, agendas/transcripts where possible with CMM Application ** Provide detail if additional positions

B. Fire Prevention Professional

ONE

- 1. Fire Prevention Officer Certification (Ontario Fire Marshal)
- 2. NFPA 1031 Level II
- 3. NFPA 1035 Level II and TAPP-C
- 4. College Diplomas/Certification Equivalent (determined by the OMFPOA Evaluation Committee)

Certificate/Transcript Attached

And

ALL

- 5. 4 x College/University Courses (with at least one in Local Gov't, Public Admin, Management, and one job related elective)
- 6. 2 x Fire Prevention/Public Education Officer Seminars (8 days) or professionally related seminars (total 48 hours ie **OMFPOA**, OAF, NFPA, IAFC)
- 7. **Employment Experience** 8 years (14,560 hours) in a Fire Prevention Division Supervisory Role

Title: _____ Employer: _____ (MM/YY): _____ to _____

Title: _____ Employer: _____ (MM/YY): _____ to _____ **

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New applicants must attach their CMM Application
Complete all sections for accurate evaluation

C.

1. Applicant: _____ Employer: _____

2. Phone: _____ E-mail: _____

3. **Signature:** _____ **Date:** _____

4. **OMFPOA Member** Yes No ****OMFPOA Membership Required to Apply****

5. **Witness:** a) Municipal Fire Official (**OMFPOA Member**): _____

b) Signature: _____ Title: _____

*Witness identity only – not verification of content.

Fire Prevention Enhancement Fee: \$293

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.

Email to info@ommi.on.ca or submit by mail to: Suite 267, 6-470 King Street West, Oshawa ON L1J 2K9

Office Use