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**State of Vermont  
Department of Public Safety  
Division of Fire Safety  
TQP Inspection Report**

Please do not use handwriting in the fields to the right. They should be filled by typewriter or printer.

<b>VT State ID</b>	<input style="width: 100%;" type="text"/>
<b>TQP Certification No.</b>	<input style="width: 100%;" type="text"/>
<b>Employer ID*</b>	<input style="width: 100%;" type="text"/>
<b>Sticker No.</b>	<input style="width: 100%;" type="text"/>
<b>Inspection Date</b>	<input style="width: 100%;" type="text"/>

- |  |   |
|--|---|
| <input type="checkbox"/> <b>Barre</b> – 1311 US Route 302 – Berlin<br>Suite 500, 05641, Phone (802) 479-4434 | <input type="checkbox"/> <b>Rutland</b> – 56 Howe Street, Bldg. A, Suite 200, 05701<br>Phone (802) 786-5867 |
| <input type="checkbox"/> <b>Williston</b> -- 372 Hurricane Lane, Suite 102, 05495<br>Phone (802) 879-2300    | <input type="checkbox"/> <b>Springfield</b> -- 100 Mineral Street, Suite 307, 05156<br>Phone (802) 885-8883 |

Name of Building: \_\_\_\_\_ Site #: \_\_\_\_\_

911 Address: \_\_\_\_\_

Town: \_\_\_\_\_ Zip Code \_\_\_\_\_

Owner: \_\_\_\_\_ Telephone \_\_\_\_\_

Town: \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Inspection type:  Fire Alarm       Suppression       Sprinkler       Generator

If an ID sticker is being removed or replaced provide the inactive VT State ID number: \_\_\_\_\_

Inspector Name (print): \_\_\_\_\_ Employer: \_\_\_\_\_

Signature of Inspector: \_\_\_\_\_

**AFFIX ID STICKER HERE FOR NEW OBJECTS**

Violations Noted:     Yes       No (please use additional pages as necessary)

\* This ID is not your employer's federal tax ID, it is assigned by the Department - please contact the Department if you are unsure of what number your employer has been assigned.

- A copy of this inspection report must be forwarded to the Regional Office within 15 working days.
- This report does not relieve the Inspection Company of keeping and maintaining the reports required by NFPA.