



# State Fire Training

Mail to: Cashier, PO Box 997446, Sacramento, CA 95899-7466  
Phone (916) 445-8444



## Fee Schedule - Certification

#	Job Function Certifications	Each	Total	#	Job Function Certifications	Each	Total
	Chief Officer (retiring 12/31/2018)	\$90			Fire Inspector I	\$65	
	Chief Fire Officer (NEW)	\$90			Fire Inspector II	\$65	
	Company Officer	\$65			Fire Investigator I	\$65	
	Community Risk Educator	\$65			Fire Investigator II	\$65	
	Community Risk Specialist	\$65			Fire Marshal	\$65	
	Community Risk Officer	\$65			Fire Mechanic I	\$65	
	Executive Chief Fire Officer (NEW)	\$65			Fire Mechanic II	\$65	
	Fire Apparatus Driver/Op. Pump	\$65			Fire Mechanic III (Master Mechanic)	\$65	
	Fire Apparatus Driver/Op. Aerial	\$65			Fire Mechanic Recertification	\$60	
	Fire Apparatus Driver/Op. Tillered	\$65			Hazardous Materials Technician	\$65	
	Fire Apparatus Driver/Op. Wildland	\$65			Hazardous Materials Specialist	\$65	
	Fire Apparatus Driver/Op. Water Tender	\$65			Training Instructor (retiring 12/31/2017)	\$65	
	Volunteer FF (retiring 12/31/2017)	\$25			Instructor I (NEW)	\$65	
	Fire Fighter I (2001) (retiring 12/31/2017)	\$40			Instructor II (NEW)	\$65	
	Fire Fighter I (2013)	\$40			Instructor III (NEW)	\$65	
	Fire Fighter I (IFSAC/ProBoard seal upgrade)	\$40			Plans Examiner (retiring 12/31/2017)	\$65	
	Fire Fighter II (2001) (retiring 12/31/2017)	\$40			Plan Examiner (2015) (NEW)	\$65	
	Fire Fighter II (2013)	\$40					
Acct Code: 5921-59210-142500-23							
<b>Certification Reciprocity/Upgrade Review</b>		Acct Code: 5921-59210-142500-17		<b>Each</b>	<b>Reciprocity total</b>		
<input type="checkbox"/>	Fire Fighter I Reciprocity/Upgrade review fee			\$60			
<b>Certification Examination</b>		Acct Code: 5921-59210-142500-15		<b>Each</b>	<b>Cert. Exam total</b>		
<input type="checkbox"/>	Fire Fighter I Certification Examination - Consecutive			\$10			
<input type="checkbox"/>	Fire Fighter I Certification Examination - Modular			\$10 p/mod			
<input type="checkbox"/>	Fire Fighter I Certification Examination – Retake Fee			\$10 p/retake			
<b>PACE IV Review (Peer Assessment for Fire Chief)</b>		Acct Code: 5921-59210-142500-23		<b>Each</b>	<b>PACE IV total</b>		
<input type="checkbox"/>	Fire Chief Application/CPSE Fire Chief Application			\$250			
<input type="checkbox"/>	Pace IV Interview			\$250			
<b>Duplicate Certification Certificate</b>		Acct Code: 5921-59210-142500-23		<b>#</b>	<b>Each</b>	<b>Dup. Cert total</b>	
*Only for certifications listed above. Order course completion certificates on Pg 2.					\$35		
Certificate Title:				Date Issued:			
Certificate Title:				Date Issued:			
<b>Grand Total Submitted:</b>							

I, the undersigned, am the person applying for certification. I hereby certify under penalty of perjury under the laws of the State of California, that all of the statements made herein are true in every respect. I understand that misstatements, omissions of material facts, or falsification of information or documents may be cause for rejection.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Full Name: \_\_\_\_\_

Home/Cell Phone: \_\_\_\_\_

Agency: \_\_\_\_\_

Agency Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

SFT ID #: \_\_\_\_\_

Last 4 digits SSN #: \_\_\_\_\_

Email: \_\_\_\_\_

FDID#(for FF appl. Only): \_\_\_\_\_



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## Fee Schedule - Courses/Accreditation

<b>Duplicate Course Certificates</b>		<b>#</b>	<b>Each</b>	<b>Dup. Cert. total</b>
CFSTES Course Certificate	Acct Code: 5921-59210-142500-20		\$35	
Course Title:	Date Completed:			
Course Title:	Date Completed:			
Course Title:	Date Completed:			
Course Title:	Date Completed:			
FSTEP Course Certificate	Acct Code: 5921-59210-142500-21		\$20	
Course Title:	Date Completed:			
Course Title:	Date Completed:			
List additional certificates on a separate page.				
<b>Course Equivalency Certificates</b>		<b>#</b>	<b>Each</b>	<b>Course Eq. total</b>
Course Equivalency Certificate	Acct Code: 5921-59210-142500-20		\$60	
SFT Course Title:	Date Completed:			
SFT Course Title:	Date Completed:			
SFT Course Title:	Date Completed:			
SFT Course Title:	Date Completed:			
List additional certificates on a separate page.				
<b>PACE III Review (Peer Assessment for Course Equivalency)</b>		<b>#</b>	<b>Each</b>	<b>PACE III total</b>
PACE III Review	Acct Code: 5921-59210-142500-20		\$60	
Course Title:				
Course Title:				
<b>ARTP/ALA Accreditation or Reaccreditation</b>		<b>#</b>	<b>Each</b>	<b>Accredit. total</b>
Application Processing	Acct Code: 5921-59210-142500-11		\$500	
Accreditation Site Review Costs (not to exceed \$2,000)				
<b>Grand Total Submitted:</b>				

I, the undersigned, am the person applying for certification. I hereby certify under penalty of perjury under the laws of the State of California, that all of the statements made herein are true in every respect. I understand that misstatements, omissions of material facts, or falsification of information or documents may be cause for rejection.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Full Name: \_\_\_\_\_

Home/Cell Phone: \_\_\_\_\_

Agency: \_\_\_\_\_

Agency Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

SFT ID #: \_\_\_\_\_

Last 4 digits SSN #: \_\_\_\_\_

Email: \_\_\_\_\_

FDID#(for FF appl. Only): \_\_\_\_\_