APPLICATION FOR DECORATIVE MATERIALS REGISTRATION - FABRIC

Company Name: ________________________________
Product Trade Name: ____________________________
Physical Address: ________________________________
Mailing Address: _________________________________
Contact Person: ________________________________ Email: ________________________________
Phone Number: ________________________________ Fax: ________________________________

*Only one mailing address and contact person is permitted per company.*

- **Fabric Application:** Provide check/money order for $575.00 (for each registration), complete test report from OSFM approved laboratory, 2 test samples of fabric 3 ½” x 10” (1 cut on warp and 1 cut on fill), and the completed application.

- **Add Fabric:** Registration No. ________ . Provide check/money order for $250.00 per product, complete test report from OSFM approved laboratory, 2 test samples of fabric 3 ½” x 10” (1 cut on warp and 1 cut on fill), and the completed application.

- **Revisions:** Registration No. ________ . Provide description of requested minor revisions (address change, etc.) and the completed application. A change of ownership must be a notarized document on company letterhead signed by the new and existing owners.

- **Secondary Registration:** Provide check/money order for $575.00, a completed application, and the following information. The manufacturer of the registered material shall certify in a letter to the OSFM that they agree to furnish the registered material to said company for sale, distribution, or use under the new name. The Concern shall certify in a notarized letter to the OSFM that the material sold, distributed, or used under the new name shall always be identical in all respects to the original.

**PRODUCT INFORMATION**

1. Product Description (100% cotton, laminated, etc.)
2. Application: □ Exterior □ Interior □ Both
3. Fiber Content/Product Composition:
4. Inherently flame resistant: □ Yes □ No
5. Topically treated with a flame retardant chemical: □ Yes □ No
If yes, name of chemical:

OSFM Registration Number:

6. Method of treatment:

7. For INTERIOR products:
   Number of washings before loss of flame retardant properties:
   Number of dry cleanings before loss of flame retardant properties:

8. For EXTERIOR products:
   Expected lifetime of the flame-retardant qualities:

9. Other limitations:

10. For “Add Fabric” Only - Difference from existing textile or material:

Please complete the following section:

☐ I hereby certify that the Flame Retardant Chemical used in our manufacturing process does not contain any chemicals banned by the State of California.

☐ I hereby certify that I have read and reviewed the Proposition 65 list posted by the Office of Environmental Health Hazard Assessment (OEHHA) and that our product is in compliance with Proposition 65 in the State of California.

CERTIFICATION: As company owner, responsible company officer or authorized agent, I certify that I have read and understand the information on this form and that the facts I present to the Office of the State Fire Marshal for review and evaluation are true and accurate. I also certify that this product complies with all applicable California and Federal laws and regulations.

Signature:  
Date:  

Printed Name of Signee:  
Title:  

FOR ACCOUNTING USE ONLY – 0102-4129400-4129400011-35405906-59425
SUBMISSION: A completed application (on an original application form) and all required supplemental data should be submitted to the address listed below. Checks should be made payable to the CAL FIRE - OSFM. Evaluations will be reviewed in the order in which they are received. Please allow 4-6 weeks processing time. Failure to supply all needed information (including signature or illegible applications) will result in REJECTION of the application package.

For regular mail (application, fee, and sample) send to:
CAL FIRE - Office of the State Fire Marshal
Cashiers Unit – Flame Retardant Program
P.O. Box 997446
Sacramento, CA 95899-7446

For shipping address, FED EX, UPS, etc., send to:
ATTN: Cashier’s Unit – Flame Retardant Program
CAL FIRE - Office of the State Fire Marshal
710 Riverpoint Court
West Sacramento, CA 95605

Please send questions to: fr@fire.ca.gov

https://osfm.fire.ca.gov/divisions/fire-engineering-and-investigations/flame-retardant-chemicals-and-fabrics

***PLEASE READ THE FOLLOWING INFORMATION CAREFULLY***

Wherever the provisions herein refer to the Office of the State Fire Marshal, also referred as OSFM, such reference shall be deemed to include and be a reference to OSFM’s directors, officers, employees, agents, contractors, and subcontractors, and to the contractor’s and such contractor's subcontractor's directors, officers, employees, and agents.

The registration by OSFM concerning the items referred to in the Application (OSFM Report does not imply any guarantee or warranty (expressed or implied) and including but not limited to merchantability) by OSFM against defects or failures in service nor any responsibility in regard to patent or trademark infringement, misuse of trade secrets or any other aspect of unfair competition. Affirmative actions of OSFM are based primarily on the data submitted by the applicant and the validity and integrity thereof as impliedly represented by applicant in submitting the same. Applicant agrees that it shall have no cause of action or claim against OSFM from time to time arising out of any registration and/or OSFM report, whether or not such report is subject to conditions, or out of any denial of this application. Applicant agrees to hold OSFM from time to time harmless, and to defend and indemnify them, with respect to any claim, liability, demand, action or judgment arising from the use or
operation by any person of the product or service to which the application relates, actual or asserted whether related to the matters set forth in the first sentence of this paragraph or otherwise, whether for personal injury, wrongful death, property damage, or any type of injury or damage whatsoever, whether or not of the same kind of nature as any of the foregoing OSFM's rights pursuant to the foregoing sentence, and applicant's obligations there under, shall apply whether or not it is claimed that OSFM was concurrently negligent with others, solely negligent, actively or passively negligent, and whether or not the legal theory of the claimant(s) is on one of the foregoing grounds or some other California law shall apply to the interpretation hereof. If any part of portion of this paragraph, or any application thereof to particular facts, should be determined invalid, the provisions hereof shall be severable so as to achieve for OSFM the maximum legal application. If this application is for a renewal or revision of an existing approval for a registration or OSFM Report, the provisions of this paragraph shall apply from the date of the first approval or OSFM Report regardless of: intervening modifications thereof or modifications pursuant to this application; any prior change in the number assigned to the application or OSFM Report and any prior change in ownership rights in or rights to the OSFM Report whether one or more, since filing of the application resulting in said first approval.

**PERMITTED USES**

Applicant agrees not to make advertising use of any OSFM approval, registration and/or OSFM Report. Applicant may make the following uses, which shall not be considered as advertising:

1. The entire current OSFM Registration Logo with product number may be reproduced in applicant’s literature or furnished to any person.
2. No reference to the OSFM approval/registration shall be included in a manner which could be misleading.
3. Any use or reference to any OSFM approval, or test report, shall be followed by the following sentence: "It is subject to re-examination, revision and possible cancellation".

- The above does not excuse compliance with any OSFM requirement as a condition of approval.
- The applicant hereby waives any rights and immunities for confidential information in-so-far as publication by OSFM or qualifying test results are concerned.

In consideration of processing of the application the applicant agrees to abide by any conditions attached to any approval, registration or renewal thereof issued pursuant to the application or any later amendment thereto. The applicant also agrees that the printed provisions set forth herein constitute a part of the applicant’s agreement.
APPLICATION FOR DECORATIVE MATERIALS REGISTRATION – CHEMICAL

Company Name: ____________________________________________________________
Product Trade Name: _______________________________________________________
Physical Address: __________________________________________________________
Mailing Address: ____________________________________________________________
Contact Person: ____________________________________________________________ Email: __________________________
Phone Number: __________________________ Fax: __________________________

*Only one mailing address and contact person is permitted per company.

☐ Chemical Application: Provide check/money order for $575.00 (for each registration), a complete test report from an OSFM approved laboratory, a Safety Data Sheet, a Product Data Sheet, and a completed application.

☐ Revisions: Registration No. ______ . Provide description of requested minor revisions (address change, etc.) and a completed application. A change of ownership must be a notarized document on company letterhead signed by the new and existing owners.

☐ Secondary Registration: Provide check/money order for $575.00, a completed application, and the following information. The manufacturer of the registered material shall certify in a letter to the OSFM that they agree to furnish the registered material to said company for sale, distribution, or use under the new name. The Concern shall certify in a notarized letter to the OSFM that the material sold, distributed, or used under the new name shall always be identical in all respects to the original.

PRODUCT INFORMATION

1. Chemical Formulation: ____________________________________________________
2. Incompatibility (materials to avoid): ______________________________________
   __________________________________________________

3. Application: ☐ Exterior  ☐ Interior  ☐ Both

4. Number of washings before retreatment required: ___________________________

5. Number of dry cleanings before retreatment required: _______________________

6. Fabrics for which chemical is to be listed:
   Fabric: __________________________  Fabric: __________________________
   Fabric: __________________________  Fabric: __________________________

7. Additional precautions or limitations: _______________________________________

Please complete the following section:

☐ I hereby certify that the Flame Retardant Chemical used in our manufacturing
process does not contain any chemicals banned by the State of California.

☐ I hereby certify that I have read and reviewed the Proposition 65 list posted by the Office of Environmental Health Hazard Assessment (OEHHA) and that our product is in compliance with Proposition 65 in the State of California.

CERTIFICATION: As company owner, responsible company officer or authorized agent, I certify that I have read and understand the information on this form and that the facts I present to the Office of the State Fire Marshal for review and evaluation are true and accurate. I also certify that this product complies with all applicable California and Federal laws and regulations.

Signature: ___________________________ Date: ___________________________
Printed Name _________________________ Title: ___________________________

of Signee: __________________________

SUBMISSION: A completed application (on an original application form) and all required supplemental data should be submitted to the address listed below. Checks should be made payable to the CAL FIRE - OSFM. Evaluations will be reviewed in the order in which they are received. Please allow 4-6 weeks processing time. Failure to supply all needed information (including signature or illegible applications) will result in REJECTION of the application package.

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- The applicant hereby waives any rights and immunities for confidential information in-so-far as publication by OSFM or qualifying test results are concerned.

In consideration of the processing of the application the applicant agrees to abide by any conditions attached to any approval, registration or renewal thereof issued pursuant to the application or any later amendment thereto. The applicant also agrees that the printed provisions set forth herein constitute a part of the applicant's agreement.
APPLICATION FOR GENERAL APPLICATOR

SECTION I

Company Name: 

Product Trade Name: 

Physical Address: 

Mailing Address: 

Contact Person: 

Email: 

Phone Number: 

Fax: 

* Only one mailing address and contact person is permitted per company.*
**Must provide physical address with zip code, NO P.O. Boxes Allowed.

SECTION II

APPLICATION IS HEREBY MADE FOR THE FOLLOWING (CHECK ONE):

☐ GENERAL: Complete all SECTIONS of application, provide check/money order for $450.00 payable to CAL FIRE - OSFM, photographs of your equipment and facilities used in performing work.

☐ REVISIONS: Registration No. . Complete SECTIONS I, II, III. Provide description of requested minor revision (address change, additional applicator(s), etc.). A Change of Ownership must be a notarized document on company letterhead signed by the new and existing owners.

SECTION III

CERTIFICATION: As company owner, responsible company officer or authorized agent, I certify that I have read and understand the information on the reverse side of this form and that the facts I present to the Office of the State Fire Marshal for review and evaluation are true and accurate.

Signature: 

Date: 

Printed Name of Signee: 

Title of Signee: 

SUBMISSION: A completed application (on an original application form) and all required supplemental data should be submitted to the address listed below. Evaluations will be

FOR ACCOUNTING USE ONLY– 0102-4129400-129400011-35405906-59425
reviewed in the order in which they are received at OSFM. **Failure to supply all needed information (including signature or illegible applications) will result in REJECTION of the application package.** After evaluation and processing, if eligible, you will receive a notice to take the examination.

For regular mail (application and fee) send to:
CAL FIRE - Office of the State Fire Marshal
Cashiers Unit – Flame Retardant Program
P.O. Box 997446
Sacramento, CA 95899-7446

For shipping address, FED EX, UPS, etc., send to:
ATTN: Cashier’s Unit – Flame Retardant Program
CAL FIRE - Office of the State Fire Marshal
710 Riverpoint Court
West Sacramento, CA 95605

Please send questions to: fr@fire.ca.gov

https://osfm.fire.ca.gov/divisions/fire-engineering-and-investigations/flame-retardant-chemicals-and-fabrics

SECTION IV

APPLICATORS:

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FOR ACCOUNTING USE ONLY– 0102-4129400-129400011-35405906-59425
B) Provide a summary of practical (on-the-job) experience in flame resistant chemical application.


C) Photographs:

*General Applicators:* Provide photographs of the equipment and facilities to be used in performing work.

**EMPLOYER RESPONSIBILITY**

Every flame-retardant application concern shall be responsible for the acts of its employees or agents, in-so-far as such acts apply to the flame-retardant treatment of any fabric or material and the concern’s registration certificate shall be subject to revocation for acts of said employees or agents.
APPLICATION FOR LIMITED APPLICATOR

SECTION I

Company Name:________________________________________
Mailing Address:_______________________________________
Contact Person:_________________________ Email:_________
Phone Number:_________________________ Fax:_________

* Only one mailing address and contact person is permitted per company.
**Must provide physical address with zip code, NO P.O. Boxes Allowed.

SECTION II  APPLICATION IS HEREBY MADE FOR THE FOLLOWING (CHECK ONE):

☐ LIMITED: Complete all SECTIONS of application, provide check/money order for $230.00 payable to CAL FIRE - OSFM, photographs or catalog picture of equipment used to chemically treat trees, and a picture or diagram of shelter where trees will be kept dry before and after treatment.

☐ REVISIONS: Registration No. _________ Complete SECTIONS I, II, III. Provide description of requested minor revision (address change, additional applicator(s), etc.). A Change of Ownership must be a notarized document on company letterhead signed by the new and existing owners.

SECTION III  CERTIFICATION: As company owner, responsible company officer or authorized agent, I certify that I have read and understand the information on this form and that the facts I present to the Office of the State Fire Marshal for review and evaluation are true and accurate.

Signature:_________________________________________ Date:_____________________
Printed Name of Signee:_________________________ Title of Signee:________________

SUBMISSION: A completed application (on an original application form) and all required supplemental data should be submitted to the address listed below. Evaluations will be

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**SECTION IV**

**APPLICATORS:**

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A) Provide a brief description of the method(s) of application to be used:

________________________________________

________________________________________

________________________________________
B) Provide a summary of practical (on-the-job) experience in flame resistant chemical application.


C) **Limited Applicators:** Provide photographs or catalog pictures of equipment you will be using to chemically treat trees AND provide photographs or a description of the type of shelter which will be provided to keep the trees dry both before and after applying the chemical treatment.

**EMPLOYER RESPONSIBILITY**

Every flame-retardant application concern shall be responsible for the acts of its employees or agents, in-so-far as such acts apply to the flame-retardant treatment of any fabric or material and the concern’s registration certificate shall be subject to revocation for acts of said employees or agents.