



STATE OF NEW HAMPSHIRE DEPARTMENT OF SAFETY
Division of Fire Safety
OFFICE OF THE STATE FIRE MARSHAL
Paul J Parisi, State Fire Marshal
 33 Hazen Drive, Concord, NH 03305
 603-223-4289, FAX 603-223-4295



**MODULAR BUILDING MANUFACTURERS APPROVAL
 BY THIRD PARTY AGENCY**

INSTRUCTIONS: Please complete form

Section I

DATE: _____

MFG NAME: _____

ADDRESS: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PRESIDENT: _____ PHONE: _____

EMAIL ADDRESS: _____

Q/A REP: _____ PHONE: _____

EMAIL ADDRESS: _____

FOR DEPARTMENT USE ONLY

REVIEWED BY: _____ DATE: _____

APPROVED BY: _____ DATE: _____

MFG. ID NUMBER: _____ **CHECK #** _____ **CHECK #** _____

TDD Access: Relay NH 1-800-735-2964
 ARSON HOTLINE 1-800-400-3526

Section II

Please include on a separate page, a list of the building systems or a copy of the Manufacturer's Building Systems Acceptance Report for which this manufacturer has approval

- A. Include an organizational chart of the manufacturer's company, showing all branches of the company.
- B. List the names of all registered engineers and registered architects responsible for designing and/or reviewing modular construction. Include a list of each state in which they are registered.
- C. Enclose a complete copy of the quality assurance program for the company.
- D. Enclose a check made out to the State of New Hampshire in the amount of \$300.00*

Section III

Under penalty of perjury, I attest that the above manufacturer has submitted information as required in SAF-C 3306 and 3307. I further attest that the information has been reviewed and meets the guidelines as specified in SAF-C 3300.

THIRD PARTY AGENCY: _____

AUTHORIZED SIGNATURE: _____ DATE: _____

TITLE: _____ PHONE: () _____ - _____

***Saf-C 3308.01 (b) the amount of \$300.00 submitted with the application is non-refundable.**

Saf-C 3308.01 (f) Upon initial approval, the manufacturer shall submit a fee of \$700.00 to the department, pursuant to RSA 205-C:6.