

Education and Training Program Approval Application
Michigan Department of Licensing and Regulatory Affairs
Bureau of Construction Codes / Building Division
P.O. Box 30255, Lansing, MI 48909
Phone: 517-241-9317
www.michigan.gov/bcc

147

Agency Use Only

PROGRAM APPROVAL NUMBER

Authority: 1986 PA 54

Penalty: Failure to provide the information may result in denial of your request.

LARA is an equal opportunity employer/program. Auxiliary aids, services and other reasonable accommodations are available upon request to individuals with disabilities.

Act 54 of 1986 and the Building Official, Plan Reviewers, and Inspector Registration Rules requires the Construction Code Commission to review and approve educational and training programs offered to building officials, plan reviewers and inspectors to meet their continuing educational and training requirements as defined by the Act. Providers of educational and training programs shall complete this form and submit it to the address listed above with the required fee.

Instructors – You may **NOT** offer an educational or training program until approval has been granted from the Bureau of Construction Codes giving specific categories and hours of instruction. This will help eliminate discrepancies for course offerings. Please read and complete this application thoroughly and provide all requested information. Questions regarding completion of this form may be directed to division staff at 517-241-9317 or bccbldg2@michigan.gov.

Approval is evidenced by a program approval report prepared by the bureau and issued to the applicant. This will include the date, conditions and period of approval. Approval is typically granted for the three year registration cycle, or the remainder of the cycle.

Fee: The fee for each program is \$150.00. Make check or money order payable to the State of Michigan.

Applicant Information (The name of the contact person provided below is the individual who may be contacted regarding the program. This person's name will appear on material distributed to registrants. If the application is made by an organization, association or educational institution, please include the contact person.)

CONTACT PERSON				
Brent Gooden				
ORGANIZATION / ASSOCIATION / EDUCATIONAL INSTITUTION (If applicable)				TELEPHONE NUMBER (Include Area Code)
Fire Safety Consultants Inc.				847-697-1300
ADDRESS	CITY	STATE	ZIP CODE	E-MAIL ADDRESS
2420 Aft Lane	Elgin	IL	60124	bgooden@firesafetyfs.com

Program Information

☒ New Program (Complete application in its entirety)

☐ Renewal Application - If your program is identical to a program you have already received approval for, you need only complete the following: Section 1 above, BCC Program Number, Page 2, Sections 3 and 4 on Page 3.

Approved BCC Program Number _____

Program Name - Provide the name of the program as you wish it listed. (A separate application is required for each program. List one program name only.)

Automatic Sprinkler Systems

Attach a copy of the curriculum or teaching outline to the application. The application cannot be processed without a thorough curriculum or outline. (Not required if program is exact renewal of previous cycle)

Program Purpose and Objective - A clearly defined statement of purpose and objective as it applies to Act 54 registered code officials must be provided.

Provide a guide for a thorough inspection of automatic sprinkler systems. Class will go over the general requirements of sprinkler systems, occupancy classifications, types of systems, types of sprinklers, sprinkler spacing and obstruction requirements, and system components.

Program Information (continued)

Provide the basis, code or standards used for the development of the program.

2015 editions of Michigan Building Code and International Fire Code
2010 edition of NFPA 13

Training equipment, teaching aids or instructional materials to be used.

Power point

Is this program a home study course? (i.e., video tape, audio cassettes or correspondence course) ☐ Yes ☒ No

Will this program be offered on a continual basis? ☐ Yes ☒ No

Is the program intended for a particular conference or seminar and offered only on a specific date? ☒ Yes ☐ No

If yes, provide the conference/seminar, location and date.

CONFERENCE/SEMINAR

Mechanical Inspectors Association of Michigan

LOCATION

O'Leary hotel, Clare, MI

DATE OF CONFERENCE/SEMINAR

April 14, 2016

Identify the category/ies this program is designed to meet. If the program is Specialty or Technical, include the code inspector/official classification the program is intended for. (Note: If the program is designed to include more than one category, the curriculum or teaching outline must include the category identification by topic.) Participants must attend the entire program to receive credit. Partial credits will not be given.

☐ Administration - Programs designed to enhance an applicant's understanding of laws, rules and the administration and enforcement of related statutes and regulations.

Contact Hours - Provide the number of contact hours required to conduct the program.
Contact hours must be provided as full hours. _____ Hours

☐ Communication - Programs designed to enhance an applicant's communication skills with the public and may include technical writing, public speaking, working with people and other similar topics.

Contact Hours - Provide the number of contact hours required to conduct the program.
Contact hours must be provided as full hours. _____ Hours

☒ Specialty - Programs designed to increase an applicant's knowledge of inspection and construction techniques in the various classifications.

Code Inspector/Official Classification

Mechanical

Contact Hours - Provide the number of contact hours required to conduct the program.
Contact hours must be provided as full hours. _____ Hours

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☒ Technical - Programs designed to discuss technical code provisions.

Code Inspector/Official Classification

Mechanical

Identify the code on which the program is based

2015 MRC, IFC and 2010 NFPA 13

(Technical hours are credited according to the code on which the program is based. Only those registered as enforcing those codes receive credit for attendance. If the program is designed to encompass more than one code, i.e., building, electrical, mechanical or plumbing, this must be shown in your curriculum or teaching outline.)

Contact Hours - Provide the number of contact hours required to conduct the program.
Contact hours must be provided as full hours. _____ Hours

3

☐ Plan Review - Programs designed to enhance an applicant's knowledge of examining construction documents to determine compliance with applicable codes.

Contact Hours - Provide the number of contact hours required to conduct the program.
Contact hours must be provided as full hours. _____ Hours

Program Information (continued)

Identify the criteria or performance measurement to determine participants who successfully complete the program.

Each student will go through examples of automatic sprinkler systems with test questions.

2. Identify the process for reporting participant names, registration numbers and verification of successful program completion to the Bureau of Construction Codes.

The rules require that you establish permanent records of student activities, including course titles, student attendance and course evaluation criteria. Identify by whom and where those records will be maintained.

Instructor Information (The instructors of educational and training programs must be approved by the Construction Code Commission. If the instructor(s) identified below does not have an instructor identification number issued by the Bureau, the instructor(s) must submit an application for instructor approval before the program application may be processed.)

Name of Instructor Brent Gooden

BCC Instructor Approval Number 2114

(Instructor Approval Application must be attached if the instructor identified above does not have a current approval number)

Name of Instructor _____

BCC Instructor Approval Number _____

(Instructor Approval Application must be attached if the instructor identified above does not have a current approval number)

Certification and Signature

4. I hereby certify all information contained in this application is true and complete. If this application is a renewal I certify the program is identical to my previously approved program submission. Falsification of this statement will result in my forfeiting any rights to continue to conduct this 1986 PA 54 educational and training program.

APPLICANT'S SIGNATURE

Brent Gooden

DATE

3/24/16

Education and Training Program Approval Application

Program Information

Program Name:

Automatic Sprinkler Systems

Curriculum:

1.) Scope, General Requirements and Definitions - Chapter 1 8:30am- 9:30am (1.0 hour)

- A. Scope
- B. Fire Protection Systems
- C. Modifications of Fire Protection Systems
- D. Fire Protection Systems Tests
- E. Monitoring of the Fire Protection Systems
- F. Definitions

2.) Automatic Sprinkler Systems – Where Required - Chapter 2 9:30am- 10:30am (1.0 hour)

- A. General
- B. Occupancy Exceptions
- C. Use Group A Assembly - Required Building or Area Sprinkler Systems
- D. Use Group B Ambulatory Health Care Building/Area Sprinkler Systems
- E. Use Group E, Educational Sprinkler Systems
- F. Use Group F-1, Factory and Industrial
- G. Use Group H, High Hazard
- H. Hazardous Production Materials (HPM) - Use Group H-5
- I. Pyroxylin Plastics - Use Group H-3
- J. Use Group I, Institutional Buildings
- K. Use Group M, Mercantile
- L. Use Group R, Residential
- M. Use Group S-1, Storage Buildings
- N. Repair Garages – Use Group S-1
- O. Bulk Tire Storage – Use Group S-1
- P. Use Group S-2 – Enclosed Parking
- Q. Use Group S-2 – Commercial Parking Garages
- R. Automatic Sprinkler System Requirements for All Use Groups
- S. Automatic Sprinkler System Installation Requirements
- T. Fire Department Connection
- U. Sprinkler System Monitoring and Alarm Requirements Tamper and Waterflow
- V. Alarms
- W. High Rise Building Floor Control Valves

- 3.) **Automatic Sprinkler System Types** - Chapter 3 10:30am – 11:00am (0.5 hour)
- A. Types of Sprinkler Systems
 - B. Water Supplies
 - C. Acceptance Tests
- 4.) **Types of Occupancies** Chapter 4 11:00am – 11:30am (0.5 hour)
- A. Types of Occupancies
 - B. Warehouse Storage Commodity Classification
 - C. Plastic Storage
 - D. Miscellaneous Storage
 - E. Occupancy and Commodity Examples
- 5.) **Types of Sprinklers** Chapter 5 11:30am – 12:30pm (1.0 hour)
- A. Sprinklers
 - B. Type of Sprinklers
 - C. Special Use Areas For High Temperature Sprinklers
 - D. Basic Types of Sprinklers: Standard Types
 - E. Types of Sprinklers: Special Types – Tyco
 - F. Types of Sprinklers: Reliable
 - G. Types of Sprinklers: Viking
 - H. Types of Sprinklers: Globe
 - I. Spare Sprinkler Cabinet
 - J. Sprinkler Guards
- 6.) **Sprinkler Spacing and Obstructions** Chapter 6 12:30pm – 1:00pm (0.5 hour)
- A. Basic Sprinkler System Principles
 - B. Upright and Pendent Standard Sprinkler Spacing Requirements
 - C. Sidewall Sprinkler Spacing Requirements
 - D. Extended Coverage Upright and Pendent Sprinklers
 - E. Extended Coverage Sidewall Sprinkler Spacing Requirements
 - F. ESFR (Early Suppression Fast Response) Sprinkler Requirements
- 7.) **System Components** Chapter 7 1:00pm – 2:00pm (1.0 hour)
- A. System Area Limitation
 - B. Return Bends
 - C. Test Pipe – Main Drain
 - D. Gauges
 - E. Fire Hose Connections
 - F. Inspector's Test Connections
 - G. Wet System Auxiliary Drains
 - H. Dry Pipe Systems Auxiliary Drains
 - I. Reducers and Bushings
 - J. Control Valves
 - K. Valve Supervision
 - L. Signs
 - M. Sprinkler Pipe Hangers

N. Fire Department Connections

8.) **Sprinkler System Plan Review Chapter 8 2:00pm – 2:30pm (0.5 hours)**

- A. Typical Sprinkler Plan Review and Inspection Guide
- B. Sprinkler Problem - 1
- C. Sprinkler Problem – 2

Identify the categories this program is designed to meet:

Specialty – 3 hours

Technical – 3 hours