



**DEPARTMENT OF FINANCIAL SERVICES**  
*Division of State Fire Marshal*

**FIRE EQUIPMENT DEALER HALON EXEMPTION AFFIDAVIT**  
**BUREAU OF FIRE PREVENTION**  
**REGULATORY LICENSING SECTION**

TO: Division of State Fire Marshal  
Bureau of Fire Prevention  
200 East Gaines Street  
Tallahassee, Florida 32399-0342

I, \_\_\_\_\_, a licensed fire equipment dealer,  
License Qualifier

License Number: \_\_\_\_\_, hereby file this affidavit on behalf of:

\_\_\_\_\_  
Company Name

Business Address State Zip Code Telephone Number

requesting that the division issue the above Fire Equipment Dealer License to reflect that the company nor the permittees under license number \_\_\_\_\_ will not engage in the business of servicing, inspecting, recharging, or installing Halon equipment.

I understand that it is unlawful, unlicensed activity of any person or firm to falsely hold himself or herself or a business organization out to perform any service, inspection, recharge, repair, or installation except as specifically described in the license.

**I FURTHER UNDERSTAND THAT WHOEVER KNOWINGLY MAKES A FALSE STATEMENT IN WRITING WITH THE INTENT TO MISLEAD A PUBLIC SERVANT IN THE PERFORMANCE OF HIS OR HER OFFICIAL DUTIES IS GUILTY OF A MISDEMEANOR OF THE SECOND DEGREE, PURSUANT TO SECTION 837.06, FLORIDA STATUTES.**

Signature of license qualifier: \_\_\_\_\_

Print Name: \_\_\_\_\_