

3. The Service Tag must contain all of the items listed in the sample below and be pre-printed, with the following information:
 - Fire Marshal’s Seal of Registration. (R-710.1.5)
 - Contrasting background, DO NOT REMOVE BY ORDER OF THE STATE FIRE MARSHAL
 - Company name or identifier (logo) with the company’s full address and 24 hour emergency service contact phone number.
 - Concern License registration “E” number or “H” number or both.
 - Technician name. (Signature line)
 - Certificate of Registration “EE” number or “HE” Number or both with (number line).
 - All information pertaining to complete date of service; year, month, day of service.
 - Information regarding type of service performed type on extinguisher and/or type of system.
 - No more than five (5) service years may be placed on a single tag.
 - This information shall be clearly punched, using a hand punch into the tag or sticker.
 - Major deficiencies, shall be written on the tag or a red tag shall be affixed with reference to the deficiency or the extinguisher or cylinder shall be removed from service.
4. The tag or sticker shall be writeable and made of a heat resistant, self-destructing material with an affixing fashioner or self-sticking adhesive on the back.

DO NOT REMOVE

BY ORDER OF THE STATE FIRE MARSHAL

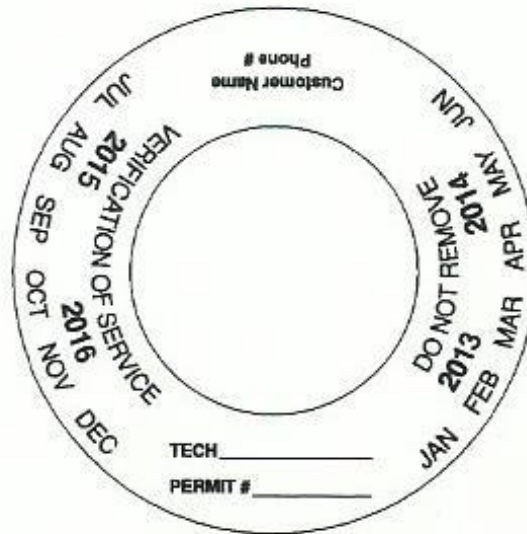
16	1	<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">TYPE</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">E:</div> <p>C.R. No. EE: _____</p> <p>Signed _____</p> <p style="text-align: center; font-weight: bold;">Your Company Name & Address Here</p> <table style="width: 100%; font-size: small;"> <tr> <td><input type="checkbox"/> Maint. Insp.</td><td>p/w</td><td><input type="checkbox"/></td></tr> <tr> <td><input type="checkbox"/> Recharge</td><td>d/c</td><td><input type="checkbox"/></td></tr> <tr> <td><input type="checkbox"/> Repair</td><td>m/p</td><td><input type="checkbox"/></td></tr> <tr> <td><input type="checkbox"/> New Ext.</td><td>co2</td><td><input type="checkbox"/></td></tr> <tr> <td><input type="checkbox"/> Hydrotest</td><td></td><td><input type="checkbox"/></td></tr> </table>	<input type="checkbox"/> Maint. Insp.	p/w	<input type="checkbox"/>	<input type="checkbox"/> Recharge	d/c	<input type="checkbox"/>	<input type="checkbox"/> Repair	m/p	<input type="checkbox"/>	<input type="checkbox"/> New Ext.	co2	<input type="checkbox"/>	<input type="checkbox"/> Hydrotest		<input type="checkbox"/>	17	2
<input type="checkbox"/> Maint. Insp.	p/w		<input type="checkbox"/>																
<input type="checkbox"/> Recharge	d/c		<input type="checkbox"/>																
<input type="checkbox"/> Repair	m/p		<input type="checkbox"/>																
<input type="checkbox"/> New Ext.	co2		<input type="checkbox"/>																
<input type="checkbox"/> Hydrotest			<input type="checkbox"/>																
18	3																		
19	4																		
20	5																		
21	6																		
22	7																		
23	8																		
24	9																		
25	10																		
26	11																		
27	12																		
28	13																		
29	14																		
30	15																		
31																			

JAN.	FEB.	MAR.	APR.	MAY	JUN.	JUL.	AUG.	SEPT.	OCT.	NOV.	DEC.	
2013			2014			2015			2016			2017

JAN.	FEB.	MAR.	APR.	MAY	JUNE	<input type="checkbox"/>																														
<input type="checkbox"/> 6 YR. MAINT.					HYDRO.TEST <input type="checkbox"/>																															
Your Company Name & Address Here																																				
TESTED TO (P.S.I.)																																				
HUNDREDS		<table style="font-size: x-small;"> <tr><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>0</td></tr> <tr><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>0</td></tr> <tr><td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>8</td><td>9</td><td>0</td></tr> </table>					1	2	3	4	5	6	7	8	9	0	1	2	3	4	5	6	7	8	9	0	1	2	3	4	5	6	7	8	9	0
1	2	3	4	5	6	7	8	9	0																											
1	2	3	4	5	6	7	8	9	0																											
1	2	3	4	5	6	7	8	9	0																											
UNITS																																				
TESTER		<table style="font-size: x-small;"> <tr><td>2013</td><td>2014</td><td>2015</td><td>2016</td><td>2017</td><td>S</td></tr> </table>					2013	2014	2015	2016	2017	S																								
2013	2014	2015	2016	2017	S																															
JULY	AUG.	SEPT.	OCT.	NOV.	DEC.																															

5. Service stickers are to follow the same design specifications as required for the Service Tags.
6. The 6-Year Maintenance and 12 year Hydrostatic Test sticker shall be uniform and follow the NFPA 10.A.8.7.2 design requirement. All print should be black on a silver background.
7. Verification-of-Service Collar (Maintenance or Recharging)
 - a. Each extinguisher that has undergone maintenance that includes internal examination or that has been recharged shall have a verification-of-service collar located around the neck of the container.

- b. The collar shall contain a single circular piece of uninterrupted material forming a hole of a size that does not permit removal of the ring when service is complete.



- c. The collar shall include the following information. Month and year the service was performed, indicated by a perforation such as is done by a hand punch and name of the agency performing the maintenance or recharge.

The Fire Marshal’s Seal of Registration

No person shall produce, reproduce, or use this seal in any manner or for any purpose except as provided by the Administrative Rules R-710.1.6 and R-710.7.5 or with permission from the SFM.



OFFICE OF THE STATE FIRE MARSHAL