

**BOOTH #**

**FIRE PROTECTION CERTIFICATION**

**PLEASE RETURN TO SHOW OFFICE WHEN COMPLETED**

The undersigned certifies that \_\_\_\_\_  
(Company Name)

\_\_\_\_\_  
(Company Address)

has made its exhibit and display materials fire-retardant by treating them with  
\_\_\_\_\_ on \_\_\_\_\_  
(Name of Fire-Retardant Treatment) (Date of Treatment)

\_\_\_\_\_  
(Signature of Company Representative)

\_\_\_\_\_  
(Name of Company Representative – Printed or Typed)

**PLEASE NOTE:** Refer to the Oshkosh Fire Department’s “Vendor Requirement” Information Sheets to ensure compliance with all local and state Fire Codes.

**THE CITY OF OSHKOSH’S FIRE CHIEF HAS ULTIMATE AUTHORITY OVER ANY FIRE CODE MATTERS AND ALSO HAS THE AUTHORITY TO MODIFY ANY CODES/LAWS DUE TO SAFETY CONCERNS.**

**Mike Augsburger, Battalion Chief  
Fire Prevention Bureau, City of Oshkosh Fire Department  
(920) 236-5241**

