



# LPI-IP Reconditioned Master Installation Certificate Application

14048 W. Petronella Dr.  
Suite 104  
Libertyville, IL 60048  
(224) 433-6680

Date of Application: \_\_\_\_\_ Date of Installation: \_\_\_\_\_  
On-Site Inspection Required By Applicant:  Yes  No  
Standard:  LPI-175  NFPA 780  UL96A  
Scope:  Structural w/ Surge  Structural Only

Application No. \_\_\_\_\_

## Section I Applicant:

Installation Contractor Name : \_\_\_\_\_  
LPI Master Installer Name / Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Office Contact Name: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Inspection Contact Name: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## Section II Building:

Building Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Applicant Job Number: \_\_\_\_\_  
Contact Name: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
 Residential  Commercial  Other \_\_\_\_\_  
Has the building ever received a Master Installation Certificate?  Yes  No  
Original Master Installation Certificate Number: \_\_\_\_\_  
\*Note: If the building has never obtained a Master Installation Certificate, alternate 3rd party certification must be attached. If no 3rd party certification exists, building is ineligible for Reconditioned Certificate.  
Reason for Reconditioned Application:  
 3-year Expiration Renewal  Building Re-roof  Physical Change to Building  
 Other: \_\_\_\_\_

## Section III Site Witnesses:

Witness\*: \_\_\_\_\_ Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Signature†: \_\_\_\_\_ Date: \_\_\_\_\_  
\*Note: Witness must be the General Contractor, Electrical Contractor, or Owner's Representative  
†Note: Witness' signature verifies that: i) the installing contractor has explained and described the lightning protection installation to the witness, and ii) the work was completed as described. Verification does not confer any liability upon the witness.

APPLICATION ONLY - NOT A CERTIFICATION



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**Section IV  
Repair  
Description:**

Perimeter of Structure \_\_\_\_\_

Was the entire building inspected for changes to structure? Including but not limited to: additions, roof top equipment, etc.  Yes  No

Was the entire lightning protection system inspected for damage?  Yes  No

Were all equipotential bonds inspected?  Yes  No

Were all repairs made in accordance with the standard?  Yes  No

N/A

Complete description below or attach additional materials (i.e. repair proposal) to describe all repairs made to bring lightning protection system up to standard. Pictures of repairs completed must also be attached.

Description of Repairs:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Section V  
Installer  
Statement:**

### INSTALLER STATEMENT

I certify that the materials utilized in this installation comply with the material considerations and minimum requirements detailed in the current edition of the standard specified in this application, and all such materials are installed in such a way to comply with installation requirements detailed in the current edition of the standard specified in this application. I also certify that the lightning protection system has been fully inspected by my company and any damage and/or changes to the structure resulting in the need for modifications to the lightning protection system have been fully remedied so that the lightning protection system meets the standard specified on this application. I also certify all information on this application is correct to best of my knowledge at the time of submission. I understand that if any deviations are found in any part of the system design or installation, those deviations must be corrected in the time allotted by LPI-IP or the owner will be contacted that the system is in non-compliance.

I have included the **following required items** as part of the application:

- System Drawings (If Available)  Dated Pictures of Repairs
- Pictures of Grounding System (If Available)  Other \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

