

STATE OF ARIZONA

Office of the State Fire Marshal

1110 W Washington St, Suite 100 Phoenix, Arizona 85007 (602) 364-1003 FAX (602)364-1052 FSG.OFM@DFBLS.AZ.GOV



FIRE STANDARDS COMPLIANT (FSC) CIGARETTE CERTIFICATION FORM

Cigarettes must be tested according to Arizona Revised Statutes §§ 41-2170 through 41-2170.08 and all rules promulgated thereunder. A separate Fire Standards Compliant Cigarette Certification Form (FSC-2) must be completed if a cigarette manufacturer employs more than one testing entity to conduct FSC cigarette testing or if certifications for any brand styles are sought at different times. Please print additional pages of the Certification by Cigarette Variety form (FSC-2A) as necessary.

MANUFACTURER				
NAME CONTACT PER		N	PHONE NUMBER	
	<u>'</u>	TESTING	-	
TESTING ENTITY				
LABORATORY OR TESTING ENTITY'S NAME		CONTACT PERSON		
ADDRESS		CITY	STATE	ZIP CODE
PHONE NUMBER		FAX NUMBER		
E-MAIL ADDRESS (optional)		WEB ADDRESS (optional)		
TEST METHOD				
	Alternate method approved by	v the Arizona State I	Fire Marshal. Attach a copy of the A	rizona Stato Eiro Marchal's
	norization of the proposed t	-	ile Maishai. Allach a copy of the A	nzona state i ne maisnais
TESTING AND QUALITY ASSUR				
ISO/IEC 17025 ACCREDITED	REPEATABILITY	ABOVE 0.19	TESTED ON 10 LAYER	PERFORMANCE STANDARD
			OF FILTER PAPER	MET*
YES	YES		YES	☐YES
□NO	∐NO		□NO	□NO
SIGNATURE	<u> </u>		<u>_</u>	
By my signature, I verify that the information	on on this form, the attachme	nts and related forms	is true. I understand that knowingly	providing a false certification
of fire standard compliant cigarettes is a v				
ORIGINAL SIGNATURE OF QUALITY ASSURANCE DIRECTOR			DATE	
QUALITY ASSURANCE DIRECTOR (please print)				
				FSC-2 05/09