

Applicant's Full Name: _____

__ Master Initial Application

__ Journeyman Initial Application

PLUMBING APPLICATION CHECKLIST

BOTH APPLICANT TYPES REQUIRED SUPPORTING DOCUMENTS

- Check, Money order made out to "State of NH - Treasury"
- Provide a color photograph at least 2" x 2" or more with no hat and no sunglasses
- Testing Results (Certificate or Transcript)
- If you answered "yes" to question 1 on the application please attach a copy of your criminal record.
- Proof Of Identification (Copy of one)
 - a. State ID
 - b. Non - Driver ID
 - c. Passport
 - d. Other government ID Name date of birth facial features

MASTER LICENSE APPLICANT ONLY

- Copy of current NH Journeyman Plumber License (held at least 6 months or more)
- A copy of any previously held out of state plumbing license or other authorization to practice as a plumber
- One letter signed by a licensed a master plumber who was supervising or directing the supervision of the applicant during military service or during the journeyman employment stating that:
 - a. Writer supervised the applicant's plumbing work in the military or journeyman employment
 - b. In the writer's opinion the applicant is competent to be a master plumber

JOURNEYMAN LICENSE APPLICANT ONLY

- Copy of apprentice ID Card; or
- A copy of any previously held out of state plumbing license or other authorization to practice as a plumber.
- One letter signed by a licensed master plumber who was supervising or directing the supervision of the applicant during military service or during the apprenticeship employment stating that:
 - a. Writer supervised the applicant's plumbing work in the military or apprenticeship employment
 - b. In the writer's opinion the applicant is competent to be a journeyman plumber
- Copy of applicant's apprenticeship completion certificate from the Dept. of Labor. If you don't have this please contact the Dept. of Labor at 603-225-1444 or 603-225-1446

Fees:
Gas Fitter: \$190
Master: \$310
Journeyman: \$190.00
Domestic Appliance: \$170
Apprentice / Trainee: \$90 / Ea.

STATE OF NEW HAMPSHIRE
OFFICE OF PROFESSIONAL LICENSURE
AND
CERTIFICATION

7 Eagle Square, Concord, NH 03301
Phone: 603-271-2152
Email: mechanical@oplc.nh.gov

OFFICE USE ONLY

Amount: _____
Check #: _____
CC Auth. #: _____
License #: _____
Expiration: _____

INITIAL APPLICATION FOR LICENSE

Service Tech Installation Tech Piping Installer Domestic Appliance Tech
Master Plumb. Journeyman Plumb. Hearth Installer Apprentice Gas Trainee

Last Name: _____ **First Name:** _____ **MI:** _____ **Suffix:** _____

Maiden Name / Alias: _____ **Date of Birth:** _____ **SS#:** _____

Per RSA 161-B:11; The Mechanical Board is required to obtain your Social Security Number for the purpose of child support enforcement. Except for its use in child support enforcement, your Social Security Number will not be used by the Mechanical Licensing Board and will be held confidential.

Physical Address: _____ **Mailing Address:** _____
City/Town: _____ City/Town: _____
State: _____ Zip Code: _____ State: _____ Zip Code: _____
Home Phone: _____ Cell Phone: _____ Email: _____

Employer or Company Name: _____

Physical Address: _____ Mailing Address: _____
City/Town: _____ City/Town: _____
State: _____ Zip Code: _____ State: _____ Zip Code: _____
Phone: _____

1. After the age of majority have you been convicted of a felony or, any criminal offense involving injury to a victim or the risk of such injury or any criminal offense involving dishonesty? Yes No
2. Have you ever been denied, subject to disciplinary action, had your authorization suspended or revoked or not reinstated to practice as fuel gas fitter or plumber in any jurisdiction? Yes No
3. Have you ever surrendered your authorization to practice as a fuel gas fitter or plumber in any jurisdiction in order to avoid or to settle disciplinary charges? Yes No
4. Do you have any disciplinary proceedings, settlement agreements or consent decrees undertaken or issued by any authority regulating fuel gas fitters or plumber or any current pending claims against you in any court? Yes No
5. Has applicant already taken the licensing examination required for licensure? Yes No

Signature: _____ **Date:** _____

"I acknowledge that (under 641:3) knowingly making a false statement on this application form is a misdemeanor. I certify that the information I have provided on all parts of the application form and the documents that I have personally submitted to support my application is complete and accurate to the best of my knowledge and belief. I also certify that I have read RSA 153:27 through RSA 153:38 and the rules of the board and promise that, if I am licensed or certified, I will abide by them.