

APPLICATION FOR MASTER PLUMBERS LICENSE

TOWN OF HUNTINGTON

TOWN OF HUNTINGTON, SUFFOLK COUNTY, N.Y.
DEPARTMENT OF ENGINEERING SERVICES

APPROVED: _____

NEW

RECIPROCAL _____

TO THE PLUMBING ADVISORY BOARD:

Name: _____

Street Address: _____ Tel. No.: _____

City: _____ State: _____ Zip Code: _____

Date of Birth: _____ Email: _____

Years employed by a Master Plumber: _____

Job Title: _____

Location of current Employer: _____ No. of Years in Business (7 Required): _____

Names and addresses of LICENSED plumbers who have employed you to perform plumbing work:

Are you presently conducting business or doing Plumbing work on your own account? _____

Do you agree to read and abide by the Town's Plumbing Code regarding Licensing Regulations, Chapter 153, Article III?

Internet Address for Plumbing Code: <https://ecode360.com/30194489>

Yes

No

Current Business Name & Location: _____

Bus. Tel. No.: _____ Email: _____

Are you now licensed? _____ If so, where? _____ Lic. No.: _____

Address: _____

STATE OF NEW YORK }
COUNTY OF SUFFOLK } SS:

I here declare, under oath, that I fully understand and have answered all of the above questions truthfully, that I am the person who is to be examined if examination is required and that I have affixed my signature to this application.

Signature of Applicant

Sworn to me this _____ day

of _____, 20 _____

(OVER)

Notary Public

VOUCHERS TO BE COMPLETED ON ALL APPLICATIONS FILED AFTER
June 14, 1968
BOTH VOUCHERS MUST BE LICENSED AND REGISTERED PLUMBERS
(Not Required For Reciprocal Licenses)

CERTIFICATE NO. 1

STATE OF NEW YORK }
COUNTY OF SUFFOLK } SS:

I hereby swear that I am a Licensed Master Plumber, and that I have employed the following applicant as a Plumber.

_____ I employed the applicant between the following dates:
_____ to _____; I have found the applicant to be competent in the field of plumbing, and
I recommend him/her to take the examination for Master Plumber.

I further swear that I have read the statements made by the applicant in this application, and I believe them to be true.

Remarks: _____

Place of Business: _____ City (Village): _____

Current Year Plumber's License No.: _____ Issued City (Village): _____

Certificate of Competency No.: _____

Sworn to me this _____ day

of _____, 20 _____

Notary Public

Plumber's Name (Please Print)

Plumber's Signature

Residence

CERTIFICATE NO. 2

STATE OF NEW YORK }
COUNTY OF SUFFOLK } SS:

I hereby swear that I am a Licensed Master Plumber, and that I have employed the following applicant as a Plumber.

_____ I employed the applicant between the following dates:
_____ to _____; I have found the applicant to be competent in the field of plumbing, and
I recommend him/her to take the examination for Master Plumber.

I further swear that I have read the statements made by him/her in this application, and I believe them to be true.

Remarks: _____

Place of Business: _____ City (Village): _____

Current Year Plumber's License No.: _____ Issued City (Village): _____

Certificate of Competency No.: _____

Sworn to me this _____ day

of _____, 20 _____

Notary Public

Plumber's Name (Please Print)

Plumber's Signature

Residence