

APPLICATION FOR LIMITED PLUMBERS LICENSE

TOWN OF HUNTINGTON
APPROVED: _____

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

NAME: _____ DATE OF BIRTH: _____

ADDRESS: _____

TELEPHONE: _____

EMAIL: _____

This Application is submitted for a limited license in the field that I have checked below

- LAWN IRRIGATION SYSTEMS
- AUTOMATIC FIRE EXTINGUISHING SYSTEMS
- FIRE SPRINKLERS
- LIQUID PROPANE GAS INSTALLATIONS

I feel that my qualifications (i.e. education, training, work experience) which provide eligibility are as follows:

1. _____

2. _____

3. _____

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 read and understand the Plumbing Licensing Ordinance of the Town of Huntington.

Signature of Applicant

Sworn to me this _____ day

of _____, 20 _____

(OVER)

Notary Public

SEE REVERSE SIDE FOR CONFIRMATION OF QUALIFICATIONS

THIS DECLARATION TO BE COMPLETED AND SIGNED BY THE PERSON(S) WHO CAN ATTEST TO THE QUALIFICATIONS STIPULATED BY THE APPLICANT ON THE REVERSE SIDE OF THIS APPLICATION

TRADE/VOCATIONAL SCHOOL _____
Name of School

Name of Authorized Person (Please Print) Signature of Authorized Person

APPRENTICESHIP _____
Name of Company

Name of Authorized Person (Please Print) Signature of Authorized Person

LICENSED PLUMBER _____
Licensed By

License Number Signature