

GOVERNMENT OF THE DISTRICT OF COLUMBIA
OCCUPATIONAL AND PROFESSIONAL LICENSING ADMINISTRATION
BOARD OF INDUSTRIAL TRADES – PLUMBING AND GASFITTING



**APPLICATION INSTRUCTIONS AND FORMS
FOR ALL LICENSE TYPES IN THE PLUMBING AND GASFITTING TRADES
IN THE DISTRICT OF COLUMBIA**

Your interest in becoming licensed in the plumbing and gasfitting industries in the District of Columbia is welcome. We look forward to providing expedient and professional service. However, the quality of our service is dependent on the completeness of your application. Please read the instructions carefully. All fees are earned when paid, and cannot be transferred or refunded except as specified in these instructions.

This package contains the forms to apply for a license in the plumbing and gasfitting industries in the District of Columbia. Follow the instructions provided below for the license type you are interested in and complete all sections. If you require more space for work experience or need to provide explanations for screening questions, attach typed responses to the form.

THE APPLICATION PROCESS

Upon submission of the required application documents, the DC Board of Industrial Trades – Plumbing and Gasfitting will review your application. Upon final approval of your application, you will either be issued a license to practice in the District of Columbia (for apprenticeship or contractor applicants only) or be authorized to sit for the District of Columbia Plumber or Gasfitter Examination (for journeyman or master applicants only).

If you submit an application that is incomplete or otherwise deficient, Pearson VUE's processing staff will notify you of the deficiencies. If the Board has any additional questions or concerns, they will contact you directly.

WHERE TO FILE

All license applications, supporting documents for licensure, examination registration forms, examination fee and licensing fees should be sent to the following address:

**PEARSON VUE
Department DC-PL
Metro-Plex II, Suite 400
8201 Corporate Drive
Landover, MD 20785**

If you have any questions, call Pearson VUE's **toll-free** Customer Service line at 1-877-540-5829 between 8:00 a.m. and 5:00 p.m. EST Monday through Friday. Please read these instructions carefully to facilitate prompt processing of your application. Illegible applications submitted without required notarization or with incorrect fees will be returned in their entirety, including fees. Please print or type all information except signatures.

EXAMINATIONS AND FILING DEADLINES

All applicants, except apprentice and contractor applicants, must pass the DC examination. **There is no reciprocity with any other jurisdiction.** All examinations will be administered via computer starting February, 2002. Examinations will be scheduled on a first come first served basis. It is your responsibility to file the

licensing application, examination scheduling form, fees and supporting documents correctly and completely. Applications submitted with incorrect fees or without notarization will be returned to the applicant.

Your completed examination scheduling form (with one photo attached) and examination fee must be submitted along with the application to Pearson VUE. It is your responsibility to mail these items. You will NOT be billed for the exam fee. If you are approved by the Board to sit for the examination, you will receive your examination confirmation notice directly from the Board about two weeks prior to the examination date.

The District of Columbia examination is OPEN BOOK. Code books can be purchased from the following sources:

Code Book Used	Purchase Information
International Plumbing Code, 2000 Edition	American Institute of Architects 1735 New York Avenue, NW Washington, DC 20001
International Fuel Gas Code, 2000 Edition	(202) 626-7300
International Mechanical Code, 2003 Edition	International Code Council www.iccsafe.org/contractor 1-888-422-7233

Candidate information handbooks are available from the International Code Council. (ICC), website: www.iccsafe.org/contractor or call 1-888-422-7233.

Pending License Applications

Pending license applications will become invalid after 90 days if the application has not been completed due to failure to submit required materials. Should the applicant wish to pursue licensure after that time, she/he must submit and pay the required fee once again.

GENERAL REQUIREMENTS FOR ALL APPLICANTS FOR LICENSURE

All applicants, including apprentices and plumbing contractors, applying for licensure in the District of Columbia shall meet the following requirements:

1. Applicant must be at least 18 years of age; and
2. Applicant must not have been convicted of a crime or moral turpitude which bears directly on the applicant's fitness to be licensed; and
3. Applicant must submit a complete and notarized application, including required supporting documents and TOTAL fees; and

All applicants, **except** contractors, must submit the following in order to be considered for licensure:

4. Two passport-type photos of the applicant's face, measuring approximately 2" x 2" with the applicant's name printed on the back. Home snapshots or computer photographs are not acceptable.
5. Notarized employment verification on company letterhead, containing the following information:
 - a. Dates of employment
 - b. Description of duties performed in detail
 - c. Signature of a currently licensed Master
 - d. Master's license number and state of licensure

Note: If the applicant is self-employed (Master Applicants only), verification of licensure from the state in which the license was issued must be provided and show proof of eight (8) years of licensure (four years as an apprentice and four years as a journeyman).

6. Certificate of Moral Character must be completed by three individuals (who are not related to the applicant) attesting to the applicant's character.

Additional Requirements for All Apprentice Applicants

1. Verification of current school enrollment in an Apprenticeship Program at an approved school (Form A – Enclosed). The form must include the school seal.
2. All apprentice applicants should contact the individual noted below to be enrolled into an apprentice program:

Mr. Lewis Brown
District of Columbia
Department of Employment Services
Apprentice Information and Training Staff
604H Street, NE #405
Washington, DC 20002

Additional Requirements for All Journeyman and Master Applicants

1. ALL Journeyman applicants MUST have completed an apprenticeship-training program. The school or training center must provide a copy of the apprenticeship program certificate and/or a notarized copy of graduation certificate in a sealed envelope that has not been opened by the applicant. Master applicants are not required to submit documents that were previously submitted with their Journeyman application; and
2. The applicant must provide a DC examination scheduling form and examination fee (included with the filing fee), at the time of registration. You will NOT be billed for the examination fee; and
3. Copy of W-2s for work history proof. Please refer to section 5B, Work Experience, for the requirements.
4. If you have ever been or are currently licensed in another jurisdiction(s), please submit the Verification of Current Licensure Form (Form B).

Additional Requirements for Designated Master and Contractor Applicants

1. An original "Plumbing and Gas Fitting Bond " for a minimum amount of \$5,000. A separate \$5,000 bond is required for a Designated Master and Contractor license. The bond(s) expiration date must coincide with the expiration date of the license i.e, 03/31 (EVEN year). The Power of Attorney form **MUST** be attached to the bond and any corrections/deletions on the bond must be signed and sealed by the Attorney-in-Fact; and
2. A Contractor/Designated Master Form with pertinent Designated Master and bond information entered in the appropriate sections.

The Designated Master is responsible for all work performed on behalf of the Contractor, and must be a bona fide member or substantial stockholder of the company. For a Gasfitting Contractor, the Designated Master must either be qualified as and licensed as a Master Gasfitter, or must be a licensed Designated Master Plumber/Gasfitter. A Plumbing/Gasfitting Contractor must designate a licensed Master Plumber/Gasfitter and may not have a Master Gasfitter or a Master Plumber as its Designated Master. For a Plumbing Contractor, the Designated Master must either be qualified and licensed as a Master Plumber, or must be a licensed Designated Master Plumber/Gasfitter.

A Master applicant may be licensed as a Designated Master at the time of his/her initial licensure as a master or may be changed to a Designated Master at a later time by submitting a Designated Master form (including \$30 fee for updating and reprinting the master license) or submitting a renewal form (no fee at renewal time). Upon termination of the contractor/master relationship, the contractor must designate another master in order to remain licensed, and the outgoing master must either be designated for another contractor or switch back to a standard master license.

Additional Requirements for All Contractor Applicants

1. Local Representative Affidavit must be completed and notarized. Applicant must complete this form only if their home address is outside of the District of Columbia; and
2. Stock Certificate must be completed and sealed. The designated master is required to;
 - A) own at least twenty percent (20%) of the outstanding shares of corporation stock (Stock certificate must be completed and sealed)

OR

 - B) be a bona fide member of the company (verification from the Office of Corporations; and
3. List of other stockholders and percentage of stock ownership; and
4. A) Original Certificate of Good Standing for your corporation/partnership. This may be obtained via the Office of Corporations located at 941 North Capitol Street NE, Washington DC 20002, (202) 442-4430;

OR

 - B) State other names, past and present, used as a plumbing contractor. You must submit verification that ALL permits have been completed. Please use the Contractor Names Certification Form to document this information; and
5. All licensed contractors are responsible for ensuring they have a designated master and licensed employees.

COMPLETING THE LICENSE APPLICATION

Section 1. Requested License Type / Fees

- a. The methods for becoming licensed in the District of Columbia are outlined below. The one letter code/abbreviation for each origin is indicated below. Write the correct origin code/method on the “**Method (Origin) of Application**” line in Section 1 of your new license application.

E – Examination	Successful completion of the DC Plumbers or Gasfitters Examination for Journeymen or Masters on the first attempt and meet other requirements.
R – Re-examination	Successful completion of the DC Plumbers or Gasfitters Examination for Journeymen or Masters on the second or a later attempt and meet other requirements.
O – Other	All Apprentice and Contractors not required to take the DC examination. Other requirements have been met.
D – Designation	Attainment of Master License and submission of Contractor/Designated Master form.

- b. Write the abbreviation for the license type for which you are applying on the “Prefix” line provided on the application. Write the corresponding license description on the “License Description” line. Select from the license types in the table below.

License Prefix	License Descriptions	Possible License Origins (Methods)	Application Fee	License Fee	Exam Fee	Total Due
PLA	Apprentice Plumber	O – Other	\$65	\$110	N/A	\$175
PLJ	Journeyman Plumber	E – Examination	\$65	\$110	\$85	\$260
PLJ	Journeyman Plumber	R – Re-Examination	\$65	\$0	\$85	\$150
PLM	Master Plumber	E – Examination	\$65	\$120	\$85	\$270
PLM	Master Plumber	R – Re-Examination	\$65	\$0	\$85	\$150
DPL	Designated Master Plumber	D – Designation	\$65	\$110	N/A	\$175
PLC	Plumber Contractor	O – Other	\$65	\$120	N/A	\$185
GA	Apprentice Gasfitter	O – Other	\$65	\$110	N/A	\$175
GJ	Journeyman Gasfitter	E – Examination	\$65	\$110	\$85	\$260
GJ	Journeyman Gasfitter	R – Re-Examination	\$65	\$0	\$85	\$150
GM	Master Gasfitter	E – Examination	\$65	\$120	\$85	\$270
GM	Master Gasfitter	R – Re-Examination	\$65	\$0	\$85	\$150
DGM	Designated Master Gasfitter	D – Designation	\$65	\$110	N/A	\$175
GC	Gasfitter Contractor	O – Other	\$65	\$120	N/A	\$185
PA	Apprentice Plumber/Gasfitter	O – Other	\$65	\$110	N/A	\$175
PJ	Journeyman Plumber/Gasfitter	E – Examination	\$65	\$110	\$85	\$260
PJ	Journeyman Plumber/Gasfitter	R – Re-Examination	\$65	\$0	\$85	\$150
PM	Master Plumber/Gasfitter	E – Examination	\$65	\$120	\$85	\$270
PM	Master Plumber/Gasfitter	R – Re-Examination	\$65	\$0	\$85	\$150
DPM	Designated Master Plumber/Gasfitter	D – Designation	\$65	\$110	N/A	\$175
PC	Plumber/Gasfitter Contractor	O – Other	\$65	\$120	N/A	\$185

- c. There are no Plumbing/Gasfitting licenses that require a specialty code. If not already indicated on your application form, please enter “N/A” for the Specialty Code and “Not Applicable” for the Specialty Description in this space.
- d. You may pay the application, license and examination fees (see table above) with a single check or money order. It is recommended that you pay by check, so that you have ready proof of payment. Checks or money orders should be made payable to **Pearson VUE** and be submitted with your application packet. Do **NOT** send cash. Please print your name on your check, if it is not pre-printed.

The application portion of the total fee is **NOT** refundable. The license fee portion of the payment is refundable in the event of final denial of a license or a request from an applicant to close the application request. In the latter event, you will have to file all documents again, should you subsequently decide to apply for licensure. It will take approximately six (6) weeks after denial or withdrawal for you to receive your refund. For your information, the application, license, and exam fee portions of each application method are listed above.

If Pearson VUE is unable to process your application because you have failed the exam, you will not automatically receive a refund. Instead, your license fee and all supporting documents will be retained and applied to your next application by Re-Examination. You have three (3) years from the time of the last application submission to meet the licensing requirements or you will have to re-apply as a new applicant.

The **Total Due** amount is the fee that must be paid for your DC license to be processed. Your new license fee includes one new license print showing the new effective date and expiration date. A charge of \$65.00 will be imposed for dishonored checks (Public Law 89-208).

Please make sure to submit your DC examination scheduling form with your application to Pearson VUE to the address noted on page 1.

DC Plumber and Gasfitter licenses expire on March 31 of even-numbered years. Your initial license will be valid for the balance of the current renewal cycle. You will be mailed a renewal notice (to your address of record) approximately three (3) months before the expiration of your license/certification. Upon completion of the renewal form and payment of the renewal fee, your license will be renewed for a two-year period. You are required by regulation to report all changes of your business or residence address to Pearson VUE on behalf of the Board within five (5) days of the change. Pearson VUE will update the address change in your database record. Requests for address change should be made via a letter. Send the letter to Pearson VUE at the address noted on page 1. Without an updated address, you may not receive your renewal notice.

Section 2. Applicant Name / Demographic Information

Enter your full legal name exactly as it should appear on your license. Due to an amendment to the D.C. laws (DC Law 13-269 – “Child Support and Welfare Reform Compliance Amendment Act of 2000, effective March 31, 2001), the Department of Consumer and Regulatory Affairs is now required to collect and maintain Social Security Numbers in licensee files. All applicants must be at least 18 years of age.

Section 3. Previous Names

List any other names you have used in the past on the lines provided. If your name has changed at any point since you attended a high school, professional or trade school, college or university, you must provide a copy of a legal name change document for EACH time that it has changed. Acceptable documents include a marriage certificate, divorce decree, or court order.

Sections 4A. & B. Home Address / Business Address

Include both your home and business addresses in the sections provided. PO box addresses are not acceptable. You are required by regulation to report all changes of your business or residence address to Pearson VUE on behalf of the Board within five (5) days of the change. Should you fail to advise Pearson VUE of your current addresses, you may not receive your renewal notice.

Section 4C. Preferred Mailing Address

Place an “X” in the appropriate box to indicate your preferred mailing address. This will be the address to which all future licensing documents will be mailed. The address that appears on your license will vary by license type. Most Plumber/Gasfitter licenses show the home address. The Contractor and Designated Master license types will show the business address of the Contractor.

Section 5A. Professional/Trade Schools Attended

List all schools you have attended (including apprentice training programs, professional and trade schools) with the most recent at the top. This section is not applicable for Contractors.

ALL Journeyman applicants MUST have completed an apprenticeship-training program. The official transcript or certificate must be submitted at the time of applying as a Journeyman.

Section 5B. Work Experience

List all work experience since graduation from college, university, professional and trade schools, with the most recent at the top. Use the key provided to describe the “Type of Position.” This section is not applicable for Contractors.

Additional submission requirements:

Apprentice applicants require – Notarized employment verification on company letterhead from a currently licensed Master. A licensed Apprentice Plumber shall work only under the direct supervision of a currently licensed Master Plumber or Master Plumber/Gasfitter. A licensed Apprentice Gasfitter shall work only under the direct supervision of a currently licensed Master Gasfitter or Master Plumber/Gasfitter. A licensed Apprentice Plumber/Gasfitter shall work only under the direct supervision of a currently licensed Master Plumber/Gasfitter.

Journeyman applicants require -- Notarized employment verification on company letterhead from a currently licensed Master. Verification must show proof of work within the Plumbing/Gasfitting trades for at least four (4) years, comprising a minimum of at least eight thousand (8,000) hours as an Apprentice Plumber/Gasfitter. A currently licensed Master must sign this verification. A licensed journeyman shall work only under the direct supervision of a currently licensed Master Plumber/Gasfitter.

Master applicants require -- Notarized employment verification on company letterhead from a currently licensed Master. Verification must show proof of work as a Journeyman Plumber/Gasfitter for not less than four years (eight thousand hours) for a total of eight years when added to the four years as an apprentice). A currently licensed Master must sign this verification.

Section 5C. Professional Licenses in Other States / Jurisdictions

If you **have ever been or are currently** licensed in another jurisdiction(s), please submit the enclosed form to the jurisdiction(s) (with fee, if required). This form should be completed by the jurisdiction(s) and sent directly to ASI.

Section 6. Screening Questions

If you answer “no” to question A or “yes” to questions B through H, please provide a complete explanation on a separate sheet of paper. If more space is required to fully answer questions, attach additional sheets with typed responses. False or misleading statements will be cause for disciplinary action and could be cause for criminal prosecution pursuant to DC Code 22-2514.

Section 7. Licensee Affidavit

The application must be signed by the applicant and notarized. However, the notary does not have to be a District of Columbia notary.

Section 8. Sponsor’s Affidavit

A licensed Apprentice Plumber shall work only under the direct personal supervision of a licensed Master Plumber or Master Plumber/Gasfitter. A licensed Apprentice Gasfitter shall work only under the direct supervision of a licensed Master Gasfitter or Master Plumber/Gasfitter. A licensed Apprentice Plumber/Gasfitter shall work only under the direct supervision of a currently licensed Master Plumber/Gasfitter. This section must be completed for all Apprentice applicants and include the Master’s signature and license number.

Section 9. Supporting Documents Required

The required supporting documents are listed in this section. Place an “X” in the “YES” box for each item you have included with your application package or requested to be sent under separate cover to ASI on behalf of the Board of Industrial Trades – Plumbing and Gasfitting.

Place an “X” in the “NO” box for each item that does not apply for the license type for which you are applying. Keep a photocopy of all supporting documents for your records.

SUMMARY OF APPLICATION REQUIREMENTS

On the next page is a chart showing the application submission requirements for all application methods. The laws governing Plumbers/Gasfitters or Gasfitters licensure are noted in *D.C. Law 2-2101 to 2-2108*. The regulations governing Plumbers, Plumbers/Gasfitters or Gasfitters licensure are included in Title 12, DCMR D.C. Constructions Code. Any conflict between these instructions and the law and regulations is inadvertent. The law and the regulations take precedence in the event of any inadvertent conflict. Please contact the Occupational and Professional Licensing Administration/Board of Industrial Trades, (202) 442-4320, if you have any questions regarding the interpretation of these laws as they pertain to your particular situation.

ADDITIONAL APPLICATION FORMS

If you need additional copies of this application package you may visit Pearson VUE's website at www.Pearsonvue.com or call Pearson VUE's customer service at 888-204-6246 to order more forms. The form numbers that make up this package are:

6609-56	DC Municipal Regulations Title 12 (Building Codes)
6709-45	Plumbing and Gas Fitting, New License Application
6709-46	Plumbing and Gas Fitting, New License Instructions
6609-94	Contractor/Designated Master Form
6709-62	Plumbing and Gas Fitting Bond Form
6709-63	Local Representative Affidavit
6809-04	Stock Certificate
6809-01	Certificate of Moral Character
6809-05	Verification of School Enrollment Form (Form A)
6809-06	Verification of Licensure Form (Form B)
6809-02	Examination Scheduling Form
6809-03	Previous Contractor Name Certification

SUMMARY OF SUBMISSION REQUIREMENTS
FOR DC PLUMBING AND GASFITTING INDUSTRIAL LICENSES

License Type	Application Method	Notarized Lic. Application Form	Two 2" x 2" Photos	Copy of Gov't. Issued Photo I.D.	School Enrollment Form	Examination Scheduling Form	Formal Education Certificate	Certificate of Moral Character	Employment Verification ²	W2 Forms	Bond Form	Contractor/Designated Master Form	Certificate of Good Standing ³	Verification of Current License ⁴	Contractor Names Cert. Form ⁵	Name Change Document ⁶	Stock Certificate or Bona Fide Member Verification ⁷	Local Representative Affidavit	Check or Money Order ⁸
PLA	Other	X	X	X	O	O	O	X	X	O	O	O	O	O	O	X	O	O	\$175
PLJ	Exam	X	X	X	O	X	X	X	X	X	O	O	O	X	O	X	O	O	\$260
PLJ	Re-Exam ¹	X	X	X	O	X	O	O	O	O	O	O	O	O	O	O	O	O	\$150
PLM	Exam	X	X	X	O	X	O	X	X	X	O	O	O	X	O	X	O	O	\$260
PLM	Re-Exam ¹	X	X	X	O	X	O	O	O	O	O	O	O	O	O	O	O	O	\$150
DPL	Designation	X	X	X	O	X	O	X	X	X	\$5,000	X	O	O	O	O	O	O	\$175
PLC	Other	X	O	O	O	O	O	O	O	O	\$5,000	X	X	O	X	X	X	X	\$185
GA	Other	X	X	X	O	O	O	X	X	O	O	O	O	O	O	O	O	O	\$175
GJ	Exam	X	X	X	O	X	X	X	X	X	O	O	O	X	O	X	O	O	\$260
GJ	Re-Exam ¹	X	X	X	O	X	O	O	O	O	O	O	O	O	O	O	O	O	\$150
GM	Exam	X	X	X	O	X	O	X	X	X	O	O	O	X	O	X	O	O	\$270
GM	Re-Exam ¹	X	X	X	O	X	O	O	O	O	O	O	O	O	O	O	O	O	\$150
DGM	Designation	X	X	X	O	X	O	X	X	X	\$5,000	X	O	O	O	O	O	O	\$175
GC	Other	X	O	O	O	O	O	O	O	O	\$5,000	X	X	O	X	X	X	X	\$185
PA	Other	X	X	X	O	O	O	X	X	O	O	O	O	O	O	X	O	O	\$175
PJ	Exam	X	X	X	O	X	X	X	X	X	O	O	O	X	O	X	O	O	\$260
PJ	Re-Exam ¹	X	X	X	O	X	O	O	O	O	O	O	O	O	O	O	O	O	\$150
PM	Exam	X	X	X	O	X	O	X	X	X	O	O	O	X	O	X	O	O	\$270
PM	Re-Exam ¹	X	X	X	O	X	O	O	O	O	O	O	O	O	O	O	O	O	\$150
DPM	Designation	X	X	X	O	X	O	X	X	X	\$5,000	X	O	O	O	O	O	O	\$175
PC	Other	X	O	O	O	O	O	O	O	O	\$5,000	X	X	O	X	X	X	X	\$185

X = Required
O = Not required

¹ Re-Examination Applicants need not resubmit supporting documents which were previously included with their original applications via Examination. You have three (3) years from your last application submission to provide the necessary licensure requirements or you will have to re-apply as a new applicant.

² Notarized employment verification letters on company letterhead MUST contain the following information: dates of employment, description of duties performed in detail, master's signature, license number and state of licensure.

³ Original Certificate of Good Standing may be obtained from the Office of Corporations.

⁴ Verification of Licensure must be provided to show proof of licensure experience at the appropriate license level. Please refer to the experience requirements noted in section 5B, Work Experience, of these instructions. If the

applicant is applying for a Master's license and is self-employed, verification of licensure from the state in which the license was issued must be provided and show proof of eight (8) years of licensure experience licensure (four (4) years as apprentice and four (4) years as journeyman).

⁵ The form is required to ensure that all permits under any previous contractor names have been completed.

⁶ Required if applicant's name has changed since attending high school, professional or trade school, college or university.

⁷ Include with Stock Certificate, a list of stockholders names and Percentage of Stock Ownership.

⁸ Check or money order MUST be made payable to **Pearson VUE**.

**GOVERNMENT OF THE DISTRICT OF COLUMBIA
Occupational and Professional Licensing Administration**

DC PL LIC02



**Board of Industrial Trades - Plumbing
NEW LICENSE APPLICATION**

Please read instructions before completing this form. If you have any questions, call Pearson VUE's toll-free Customer Service line at **1-877-540-5829** Monday through Friday, 8AM to 5PM EST. **A charge of \$65.00 will be imposed for dishonored checks (public Law 89-208).**

SECTION 1. REQUESTED LICENSE TYPE/FEEs (includes non-refundable application fee – see instructions)

Method (Origin) of Application: (See page 4-5 of Instructions for License Type, Specialties and Fee Listing to complete below).
(Check only one)

- | | | |
|-------------|--------------------------|--------------------|
| Code | | Description |
| (E) | <input type="checkbox"/> | Examination |
| (R) | <input type="checkbox"/> | Re-examination |
| (O) | <input type="checkbox"/> | Other |
| (D) | <input type="checkbox"/> | Designation |

Requested License Type:

_____ \$____.00
Code Description

Requested Specialty:

_____ \$____.00
Code Description

Make check or money order payable to
Pearson VUE and mail to:

Pearson VUE
Department DC – PL
Metro-Plex II, Suite 400
8201 Corporate Drive
Landover, MD 20785

Duplicate Licenses _____ X \$30.00 = \$____.00

Pearson VUE ONLY

Check \$	Ck #	Clerk	Total Enclosed \$____.00
\$ _____.00			

SECTION 2. APPLICANT OR COMPANY NAME/DEMOGRAPHIC INFORMATION

Enter your name exactly as it should appear on the license. If your name has changed at any point since you first attended college or university, please complete the "Previous Names" section of this application. You must also provide a copy of a legal name change document for EACH time that it has changed. Acceptable documents for individuals are marriage certificates, divorce decrees, or court orders.

FIRST NAME _____ MI _____ LAST NAME _____ SUFFIX _____
(Jr, Sr, etc.)

_____-_____-_____
SOCIAL SECURITY NUMBER*/FEIN

M M D D Y Y Y Y
____-____-_____
DATE OF BIRTH

Male Female
GENDER
Please check the correct box.

PLACE OF BIRTH

Provide City and State for US birthplace or Country for foreign place of birth.

* Due to an amendment to the D.C. laws (DC Law 13-269 – "Child Support and Welfare Reform Compliance Amendment Act of 2000," effective March 31, 2001), the Department of Consumer and Regulatory Affairs is now required to collect and maintain Social Security Numbers in licensee files.

NOTICE OF NON-DISCRIMINATION

In accordance with the D.C. Human Rights Act of 1977, as amended, D.C. Code §2-1401.01 *et seq.* ("the Act"), the District of Columbia does not discriminate on the basis of race, color, religion, national origin, sex, age, marital status, personal appearance, sexual orientation, familial status, family responsibilities, matriculation, political affiliation, disability, source of income, or place of residence or business. Discrimination in violation of the Act will not be tolerated. Violators will be subject to disciplinary action.

NOTICE OF MAKING FALSE STATEMENTS

Any person convicted of making false statements shall be fined not more than \$1,000 imprisoned for not more than 180 days, or both. A person commits the offense of making false statements if that person willfully makes a false statement that is in fact material, in writing, directly or indirectly, to any instrumentality of the District of Columbia government, under circumstances in which the statement could reasonably be expected to be relied upon as true.

NOTICE OF FRAUD, CORRUPTION AND WASTE

If you are aware of corruption, fraud, waste, abuse, or mismanagement involving any D.C. government agency, official or program, contact the Office of the Inspector General (OIG) at the OIG Hotline, (202) 727-0267 or (800) 521-1639 (toll free). All reports are confidential and you may remain anonymous. By law, government employees are protected from reprisals or retaliation by their employers for reporting to the OIG. The information you provide may result in an investigation leading to administrative action, civil penalties, or criminal prosecution in appropriate cases.

**GOVERNMENT OF THE DISTRICT OF COLUMBIA
Occupational and Professional Licensing Administration**

NEW LICENSE APPLICATION

SECTION 3. PREVIOUS NAMES

If your name has changed at any point since you first attended college or university, you must provide a copy of a legal name change document for EACH time that it has changed. Acceptable documents for individuals are marriage certificates, divorce decrees, or court orders.

Changed to current name by: Marriage Divorce Court Order

FIRST NAME MI LAST NAME SUFFIX
Changed to current name by: Marriage Divorce Court Order (Jr, Sr, etc.)

FIRST NAME MI LAST NAME SUFFIX
Changed to current name by: Marriage Divorce Court Order (Jr, Sr, etc.)

FIRST NAME MI LAST NAME SUFFIX
Changed to current name by: Marriage Divorce Court Order (Jr, Sr, etc.)

FIRST NAME MI LAST NAME SUFFIX
(Jr, Sr, etc.)

SECTION 4A. HOME ADDRESS

Even if you have a PO Box, a street address MUST also be provided. The zip code should correspond to the PO Box number.

APARTMENT SUITE FLOOR PO BOX NUMBER _____

HOME STREET ADDRESS 1 (If applicable, use this line for additional building information. Otherwise, use this line to indicate STREET NUMBER and STREET NAME)

HOME STREET ADDRESS 2 (If additional space is needed, use this line to indicate STREET NUMBER and STREET NAME)

CITY

STATE ZIP CODE + 4

HOME PHONE NUMBER HOME FAX NUMBER

SECTION 4B. BUSINESS ADDRESS

Even if you have a PO Box, a street address MUST also be provided. The zip code should correspond to the PO Box number.

COMPANY NAME

APARTMENT SUITE FLOOR PO BOX NUMBER _____

BUSINESS STREET ADDRESS 1 (If applicable, use this line for additional building information. Otherwise use this line to indicate STREET NUMBER and STREET NAME)

BUSINESS STREET ADDRESS 2 (If additional space is needed, use this line to indicate STREET NUMBER and STREET NAME)

CITY

STATE ZIP CODE + 4

BUSINESS PHONE NUMBER BUSINESS FAX NUMBER

SECTION 4C. PREFERRED MAILING ADDRESS

Indicate your preferred mailing address by placing an "X" in the appropriate box. This will be the address to which all future licensing documents will be mailed. The address that will appear on your license is determined by your license type.

HOME BUSINESS

**GOVERNMENT OF THE DISTRICT OF COLUMBIA
Occupational and Professional Licensing Administration**

NEW LICENSE APPLICATION

SECTION 6. QUESTIONS – Applicants MUST answer all of the following questions.

Please answer all of the following questions by placing an "X" in the appropriate boxes. If you answer "No" to question A or "Yes" to any of questions B through H below, you must provide full information and complete details on a separate sheet of paper and attach with this application form.

**Pearson VUE
ONLY**

A. I certify that I am in compliance with the "Clean Hands Before Receiving a License or Permit Act of 1996" (DC Law 11-118, DC Code §47-2861 et seq.) and I do not owe any outstanding debt over \$100 to the District government as a result of any fine, fee, penalty, interest, or past due taxes as stipulated in that law.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input type="checkbox"/>
B. Have you ever been convicted of a crime (other than minor traffic violations) not previously reported to the Board?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input type="checkbox"/>
C. Have you ever been licensed in DC?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input type="checkbox"/>
D. Have you ever been licensed in any other state/jurisdiction? (If "Yes," be sure to complete the "Professional Licenses in Other States/Jurisdictions" section of this form.)	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input type="checkbox"/>
E. Have you ever voluntarily surrendered a license after formal charges have been filed against you or while under investigation?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input type="checkbox"/>
F. Has any authority taken adverse action against your license or privileges or informed you of any pending charges not previously reported to this board?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input type="checkbox"/>
G. Do you have a physical or medical condition that currently impairs your ability to practice your profession?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input type="checkbox"/>
H. Has the use of drugs and/or alcohol resulted in an impairment of your ability to practice your profession?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input type="checkbox"/>
I. Have you withdrawn an application to practice your profession in DC or any other state/jurisdiction?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input type="checkbox"/>

SECTION 7. LICENSEE AFFIDAVIT

I, being duly sworn, depose and say that the information given in this application, including all writings and exhibits attached hereto, is true and complete.

**Pearson VUE
ONLY**

LICENSEE SIGNATURE

NAME (Please Print)

DATE

Subscribed and sworn to before me this ____ day of _____, _____ by the affiant, who personally appeared before me.
(Month) (Year)

**Pearson VUE
ONLY**

NOTARY PUBLIC SIGNATURE

MY COMMISSION EXPIRES

(SEAL)

SECTION 8. SPONSOR'S AFFIDAVIT

**Pearson VUE
ONLY**

SPONSOR'S SIGNATURE

NAME (Please Print)

DATE

SPONSOR'S LICENSE PREFIX AND NUMBER

Pearson VUE ONLY

Board approval date (mm/dd/yyyy): _____

**GOVERNMENT OF THE DISTRICT OF COLUMBIA
Occupational and Professional Licensing Administration**

NEW LICENSE APPLICATION

SECTION 9. SUPPORTING DOCUMENTS REQUIRED			Pearson VUE ONLY	
Please indicate the supporting documents you have included with this package or requested to be sent to Pearson VUE on behalf of your professional licensing Board. Keep a photocopy of all supporting documents for your records.				
A.	All applicants <u>except</u> Contractor applicants: Two recent passport-type photos of the applicant's face (approx. 2" X 2") with applicant's name printed on the back. Home snapshots or computer photographs are not acceptable.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input type="checkbox"/>
B.	If Apprentice applicant: Completed Verification of School Enrollment Form from an approved school. Form must include the school's seal.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input type="checkbox"/>
C.	All applicants <u>except</u> Contractor applicants: Notarized Employment Verification Letters on company letterhead.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input type="checkbox"/>
D.	If Master or Designated Master applicant is self-employed: Verification of Licensure Form completed by the state in which the license was issued.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input type="checkbox"/>
E.	If Journeyman, Master or Designated Master applicant: Copy of W-2s for proof of work history.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input type="checkbox"/>
F.	All applicants <u>except</u> Contractor applicants: Certificate of Moral Character must be completed by three individuals (not related to the applicant).	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input type="checkbox"/>
G.	If applicant's name has changed since attending high school: Copies of legal documents supporting all name changes.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input type="checkbox"/>
H.	If Journeyman, Master, or Designated Master applicant: Completed DC Examination Scheduling Form (with one photo attached).	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input type="checkbox"/>
I.	If Designated Master or Contractor applicant: Completed Bond Form (in the amount specified in instructions) and the expiration of the bond(s) must coincide with the expiration of your license, i.e, 03/31 (EVEN year). The Power of Attorney form must be attached to the bond(s) signed and sealed by the Attorney-in-Fact.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input type="checkbox"/>
J.	If Contractor applicant: ORIGINAL Certificate of Good Standing for your corporation/partnership.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input type="checkbox"/>
K.	If Designated Master or Contractor applicant: Completed Contractor/Designated Master Form.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input type="checkbox"/>
L.	If Contractor applicant: Completed Contractor Name(s) Certification Form to verify that ALL outstanding permits have been completed.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input type="checkbox"/>
M.	If applicant has ever been or is currently licensed in another state/jurisdiction: Verification of Licensure Form completed by that state/jurisdiction.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input type="checkbox"/>
N.	If Contractor applicant's home address is outside the District of Columbia: Completed Local Representative Affidavit.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input type="checkbox"/>
O.	If Journeyman applicant: Copy of Apprenticeship Program Certificate OR notarized copy of Graduation Certificate in a sealed envelope directly from the school.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input type="checkbox"/>
P.	If Contractor applicant: Sealed Stock Certificate (top half of form) OR Bona Fide Member Verification from DC Office of Corporations.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input type="checkbox"/>
Q.	If Contractor applicant: List of other stockholders (use the bottom half of the Stock Certificate Form).	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input type="checkbox"/>
R.	Not applicable.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input type="checkbox"/>
S.	Not applicable.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input type="checkbox"/>
T.	Not applicable.	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input type="checkbox"/>

GOVERNMENT OF THE DISTRICT OF COLUMBIA
Occupational and Professional Licensing Administration

NEW LICENSE APPLICATION

Pearson VUE ONLY – EXAM RESULTS

EXAM #1		EXAM #2	
Exam Name/ID:	<input type="text"/>	Exam Name/ID:	<input type="text"/>
Exam Date: (mm/dd/yyyy)	<input type="text"/>	Exam Date: (mm/dd/yyyy)	<input type="text"/>
Raw Score:	<input type="text"/>	Raw Score:	<input type="text"/>
Converted Score:	<input type="text"/>	Converted Score:	<input type="text"/>
Score Status:	Pass <input type="checkbox"/> Fail <input type="checkbox"/>	Score Status:	Pass <input type="checkbox"/> Fail <input type="checkbox"/>
Exam Part/ID:	<input type="text"/>	Exam Part/ID:	<input type="text"/>
Raw Score:	<input type="text"/>	Raw Score:	<input type="text"/>
Converted Score:	<input type="text"/>	Converted Score:	<input type="text"/>
Score Status:	Pass <input type="checkbox"/> Fail <input type="checkbox"/>	Score Status:	Pass <input type="checkbox"/> Fail <input type="checkbox"/>
EXAM #3		EXAM #4	
Exam Name/ID:	<input type="text"/>	Exam Name/ID:	<input type="text"/>
Exam Date: (mm/dd/yyyy)	<input type="text"/>	Exam Date: (mm/dd/yyyy)	<input type="text"/>
Raw Score:	<input type="text"/>	Raw Score:	<input type="text"/>
Converted Score:	<input type="text"/>	Converted Score:	<input type="text"/>
Score Status:	Pass <input type="checkbox"/> Fail <input type="checkbox"/>	Score Status:	Pass <input type="checkbox"/> Fail <input type="checkbox"/>
Exam Part/ID:	<input type="text"/>	Exam Part/ID:	<input type="text"/>
Raw Score:	<input type="text"/>	Raw Score:	<input type="text"/>
Converted Score:	<input type="text"/>	Converted Score:	<input type="text"/>
Score Status:	Pass <input type="checkbox"/> Fail <input type="checkbox"/>	Score Status:	Pass <input type="checkbox"/> Fail <input type="checkbox"/>
EXAM #5		EXAM #6	
Exam Name/ID:	<input type="text"/>	Exam Name/ID:	<input type="text"/>
Exam Date: (mm/dd/yyyy)	<input type="text"/>	Exam Date: (mm/dd/yyyy)	<input type="text"/>
Raw Score:	<input type="text"/>	Raw Score:	<input type="text"/>
Converted Score:	<input type="text"/>	Converted Score:	<input type="text"/>
Score Status:	Pass <input type="checkbox"/> Fail <input type="checkbox"/>	Score Status:	Pass <input type="checkbox"/> Fail <input type="checkbox"/>
Exam Part/ID:	<input type="text"/>	Exam Part/ID:	<input type="text"/>
Raw Score:	<input type="text"/>	Raw Score:	<input type="text"/>
Converted Score:	<input type="text"/>	Converted Score:	<input type="text"/>
Score Status:	Pass <input type="checkbox"/> Fail <input type="checkbox"/>	Score Status:	Pass <input type="checkbox"/> Fail <input type="checkbox"/>

NOTICE

This application for licensure in the District of Columbia is provided to you in a ***new interactive format***. This application form **can** be filled out online, but the form **cannot** be submitted electronically. You must print out the completed form and submit with all other required documentation listed in the application instructions section of the new license package.

Please note the following instructions for completing your application form:

- Fill out your application information online.
- Print and notarize your completed application form.
- Mail the application, along with all required supporting documents and applicable fees, to Pearson VUE at the address listed on the application.

Should you encounter any problems with completing the application form online, we welcome your questions and feedback. We encourage our customers to contact us by **email**, or by dialing the toll-free number listed on the application.

[Proceed to the application.](#)



GOVERNMENT OF THE DISTRICT OF COLUMBIA
 OCCUPATIONAL AND PROFESSIONAL LICENSING ADMINISTRATION
BOARD OF INDUSTRIAL TRADES - PLUMBING AND GASFITTING
LOCAL REPRESENTATIVE AFFIDAVIT

 Name of Firm (Contractor)

I, _____
 Local Representative Name

 Address

Telephone Number _____

a resident of the District of Columbia, do hereby agree to be the local representative of the above contractor, to accept notices, summons or other legal notices for said contractor and to notify Pearson VUE at Dept. DC-PL, Metro-Plex II, Suite 400, 8201 Corporate Drive, Landover, MD 20785 within five (5) days of any change in my address or any change in the conditions of my agreement to act as agent for said contractor.

 Signature of Local Representative

 Signature of Contractor Owner, Partner or Officer

 Printed Name

 Social Security or FEIN Number

(SEAL, IF INCORPORATED)

 Title

The above named person(s) appeared before me this day and certified that the above information is correct and accurate, and that the above are their true signatures.

Subscribed and (affirmed) sworn to before me this _____ day of _____
 Month, Year

(Notary Seal)

 Notary Public

**GOVERNMENT OF THE DISTRICT OF COLUMBIA
BOARD OF INDUSTRIAL TRADES – PLUMBER/GASFITTER
Instructions for Examination**

These instructions are provided to assist you with completing the Examination Scheduling Form, on the reverse side, and sitting for the exam. Please type or print neatly in black ink, all the information requested.

1. Request a licensing packet from Pearson VUE at 1-877-540-5829.
2. Submit the Application and exam scheduling form for a DC License, with all the required supporting documentation and payment (The total fee for licensure by examination is \$270 and for re-examination, the fee is \$150) via check or money order to:

Pearson VUE, Inc.
Department DC-PL
Metro-Plex II, Suite 400
8201 Corporate Drive
Landover, MD 20785

The appropriate Board will review your application and determine your eligibility to take the examination.

3. If you are approved by the Board to sit for the examination, you will receive your examination confirmation notice directly for the Board about two weeks prior to the examination date. This notice will confirm the location, date and time of your examination.

If you do not receive an admission letter, please contact the DC test administration unit, (202) 442-4363, to make Sure your application was received.

Examinations are scheduled on a first come, first served basis. All examinations will be administered via computer starting January 2002.

Special Accommodations

If a visual, physical, learning, or other disability prevents you from taking the examination under normal conditions you may request a special accommodation. Please submit written documentation of your need with your application to help determine what arrangements can be made.

Rescheduling

If you cannot appear on your scheduled exam date, you may reschedule. You must notify DC by phone or mail **prior** to the exam date in order to reschedule. You must reschedule with the DC Department of Consumer and Regulatory Affairs by calling (202) 442-4363.

Examinations and References - Plumber/Gasfitter Closed Book, 70% to pass
Master Gasfitter (50 questions, 2 hours)
Master Plumber/Gasfitter (70 questions, 4 hours)

References - International Plumbing Plumbing Code 95
International Mechanical 96
Including 96 Supplement
NFPA 54 '92 and DCMR 12 – '99

This DC Supplement is available from the Office of Documents, 441 4th Street NW Suite 520, Phone (202) 727-5090. For information about obtaining other references, call toll free (888) 264-2665.



GOVERNMENT OF THE DISTRICT OF COLUMBIA
OCCUPATIONAL AND PROFESSIONAL LICENSING ADMINISTRATION
BOARD OF INDUSTRIAL TRADES – PLUMBING AND GASFITTING
EXAM SCHEDULING FORM

Please complete this exam scheduling form and mail it along with your application. **For further information, read the instructions on the reverse side of this form.** Send this form and the appropriate fee to:

Pearson VUE, Department DC-PL, Metro-Plex II, Suite 400, 8201 Corporate Drive, Landover, MD 20785

Please Type or Print Legibly

	MI		SUFFIX
FIRST NAME		LAST NAME	

DATE OF BIRTH (MM-DD-YYYY)									

SSN NUMBER									

<input type="checkbox"/> APARTMENT	<input type="checkbox"/> SUITE	<input type="checkbox"/> FLOOR	<input type="checkbox"/> PO BOX NUMBER	
------------------------------------	--------------------------------	--------------------------------	--	--

HOME STREET ADDRESS 1 (If applicable, use this line for additional building information. Otherwise, use this line to indicate STREET NUMBER and STREET NAME)

HOME STREET ADDRESS 2 (If additional space is needed, use this line to indicate STREET NUMBER and STREET NAME)

CITY

STATE	ZIP CODE + 4	HOME PHONE NUMBER	BUSINESS PHONE NUMBER		

Please check the examination that you will take, whether this is your first exam attempt or a re-exam and total fee paid.

- | | | |
|---|---|---|
| <input type="checkbox"/> Master Plumber/Gasfitter | <input type="checkbox"/> Journeyman Plumber/Gasfitter | <input type="checkbox"/> Journeyman Exam \$260.00 |
| <input type="checkbox"/> Master Gasfitter | <input type="checkbox"/> Journeyman Gasfitter | <input type="checkbox"/> Re-Exam \$150.00 |
| <input type="checkbox"/> Master Plumber | <input type="checkbox"/> Journeyman Plumber | <input type="checkbox"/> Master Exam \$270.00 |

\$ _____ TOTAL FEE PAID¹

¹ The Total Fee for **application by examination** is \$270.00 for Master and \$260.00 for Journeyman. The Total Fee for **application by re-examination** is \$150.00. Checks or money orders should be made payable to Pearson VUE, Inc. Do not send cash.

The examination will be scheduled on a first come, first served basis. You will be scheduled for an exam date based entirely on availability for the next examination seat. **The Board will attempt to honor your scheduling preferences, but there is no guarantee your request can be honored.** Please note your preference for exam time in the boxes below.

- | |
|-------------------------------------|
| <input type="checkbox"/> AM Session |
| <input type="checkbox"/> PM Session |

Please sign and date below:

Signature

Date

To report waste, fraud, or abuse by any DC Government office or official, call the DC Inspector General at 1-800-521-1639.

Government of the District of Columbia



BOARD OF INDUSTRIAL TRADES - PLUMBING AND GASFITTING
Certificate of Moral Character

This certifies that we have been personally acquainted with _____ (name),
_____(social security number) for a period of not less than five (5) years; that s/he is not
addicted to the intemperate use of alcohol or narcotic drugs; that we know him/her to be of good moral character
and hereby recommend him/her as being worthy to be licensed to practice in the District of Columbia, pursuant to
law.

REFERENCES – This is to certify that I have been acquainted with the above named applicant and I know
him/her to be a person of intelligence, good habits and character. I am not a relative.

1. _____
Signature Printed Name Date

Address

Address

Telephone Number

2. _____
Signature Printed Name Date

Address

Address

Telephone Number

3. _____
Signature Printed Name Date

Address

Address

Telephone Number

Return this form to:

Pearson VUE
Dept. DC - PL
Metro-Plex II, Suite 400
8201 Corporate Drive
Landover, MD 20785