



Westchester County Department of Consumer Protection
Westchester County Board of Plumbing Examiners
148 Martine Avenue, Room 407
White Plains, NY 10601
914-995-2657
consumer.westchestergov.com

MASTER AND JOURNEY-LEVEL PLUMBING EXAM APPLICATION

Which Exam Are You Applying For: Master Plumber () Journey-Level Plumber ()

Applicant Name: First: _____ Last: _____ Middle: _____

Home Street Address: _____ Apartment/Suite#: _____

City: _____ State: _____ Zip: _____

Date of Birth: _____ Email: _____

Home Phone (If different from cell phone): _____ Cell Phone: _____

Height: _____ Weight: _____ Eye Color: _____ Hair Color: _____

Name of Present Employer: _____ License # _____

Have you ever been approved to take this exam before? : Yes () No () When? _____

Have you ever been licensed by this department before? : Yes () No () When/Lic#? _____

This is a two-sided document. Review the second page of this form for additional instructions.

I certify that the information on this form and all supporting documents are true and accurate. I understand that any incomplete, inaccurate or false information may cause my application to be delayed or denied and my application will not be accepted by this office until such time as any and all deficiencies have been corrected.

APPLICANT SIGNATURE PRINT APPLICANT NAME DATE

Subscribed and sworn to me this _____ Day of _____, 20 _____

In the State of _____ County of _____

Signature of Notary Public Affix Seal:



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REQUIRED DOCUMENTATION AND GUIDELINES FOR ALL PLUMBING EXAM APPLICANTS

Master Plumber All applicants shall provide proof of the successful completion of **ten (10) years** of full-time experience in the employ of a licensed Master Plumber in accordance with the Countywide Plumbing License Law and the Rules and Regulations of the Board of Plumbing Examiners.

Journey-Level All Journey-Level Plumber applicants shall document the successful completion of (a) five years of experience in the business of Plumbing as defined by the plumbing law in the employ of licensed master plumbers as an apprentice plumber or (b) the successful completion of a five-year plumbing apprentice program as the requirement for application.

ALL APPLICANTS SHALL INCLUDE THE FOLLOWING ITEMS WITH THEIR APPLICATION:

1. Proof of employment shall, as a minimum requirement, consist of one (1) of the following documents: **(A)** Detailed Social Security earnings report <http://www.socialsecurity.gov/forms/ssa-7050.html> or **(B)** Federal W-2 Forms showing the applicants name, the employer's name and the reported income from each employer or **(C)** Federal Schedule C or K-1 forms showing proof of business ownership if the applicant is self-employed and cannot produce either item A or B. **All documents must include the full business name of the license holder (including yourself if self-employed) for all previous and current employers.**
2. A completed, signed and notarized employment verification form from all previous and current employers (including yourself if self-employed) that you are claiming experience from. (In addition to item #1)
3. Letters of good standing and/or verification from any jurisdictions outside of Westchester County where licenses are held by the applicant and/or his or her previous or current employer. All letters must indicate the original issue date of each license.
4. One (1) form of photo identification (ex: driver's license).
5. Application fees: **Master Plumber- \$50.00, Journey-Level Plumber- \$25.00** Application fees are payable to payable to: **"Westchester County General Fund"**. Approved payment methods are: check, money order or credit card (use credit card payment authorization form). **Cash payments will not be accepted.**
6. Applications will be reviewed by the licensing board in the order that they are received. Upon approval for testing, applicants will be notified via email of the next available examination date.
7. Please mail all completed applications to: **Westchester County Department of Consumer Protection 148 Martine Avenue Room 407 White Plains, NY 10601.**
8. If you have any questions regarding this application, please contact the Trades Licensing Division at 914-995-2657 or via email at cp-trades@westchestercountyny.gov.



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EMPLOYMENT VERIFICATION FORM-MASTER AND JOURNEY-LEVEL PLUMBER

Company Owner/License Holder: The following applicant is applying to take the Westchester County Plumbing examination and has indicated that they have worked under your direct supervision during their time of employment. Each applicant is required to submit an original signed and notarized copy of this form with their application for all employers that they are using as proof of experience.

THE FOLLOWING INFORMATION IS TO BE COMPLETED BY THE COMPANY OWNER OR LICENSE HOLDER

Applicant/Employee Name: First: _____ Last: _____

Dates of Employment: From: _____ To: _____

Company Name or Name of Employer: _____

Business Address: _____

Business Phone Number: _____ License Holder Name: _____

License Number(s) and Jurisdiction(s): _____

I, _____ hereby certify, under penalty of perjury, that _____ is or has been duly employed on a full time basis by the above named entity under the direct supervision of a licensed Master Plumber working on the installation, maintenance, extension, testing, alteration or repair of piping, valves, fixtures and plumbing appliances in connection with sanitary drainage or storm drainage facilities; venting systems and public or private water supply systems or installing piping, valves or fittings on premises or in a building that will be utilized to convey natural gas. I agree to submit additional documentation, if requested, to the licensing board to verify the above information and that refusal to sign this document may result in further action by the licensing board.

SIGNATURE OF LICENSED MASTER PLUMBER

PRINT NAME

DATE

Subscribed and sworn to me this _____ Day of _____, 20 _____

In the State of _____ County of _____

Signature of Notary Public Affix Seal: