TO:	The Borough of Chambersburg	Approval by Board: Approval Date:		
	Plumbers' Examining Board 100 South Second Street Chambersburg, PA 17201 Email application to: jsprenkle@cham Phone 717-251-2430; Fax 717-261-32			
	REQUEST PERMISSION TO AND RECEIVE MASTER LIC	TAKE EXAMINATION FOR MASTER PLUMBER CENSE - FEE - <u>\$50.00</u>		
	REQUEST FOR SPECIAL LIG (1 ANNUALLY)	CENSE TO PERFORM A SPECIFIED CONTRACT FEE - <u>\$300.00</u>		
Name	e of Applicant:	Date of Birth:		
Addre	ess:	Phone No.:		
Cell P	Phone No.: Er	nail:		
		Phone No.:		
Emplo	oyer's Address			
worki exper <u>REQI</u> satisfa	ing as a plumber under a master plum ience is required if applicant has grad <u>UIRED EXPERIENCE FOR SPECIA</u> actory to the Plumbers' Examining Bo	Applicant must have three years (full time) experienceaber or under a mechanical contractor. One year lessauated from a high school with vo-tech plumbing training.L LICENSE:Applicant mush furnish evidencebard of his skill, experience, and current active practice as assued by another municipality or other comparable evidence.		
_	CATION:			
	High School Year Graduated	Name of School		
	Trade SchoolName of School	Years attended Year Graduated		
	Course at Trade School			
		g Trade, Continuous?		
	Was plumbing trade experience interru	upted?, Why?		

1

## PLUMBING EXPERIENCE:

List below former employers (names of persons with or under whom you practiced plumbing trade). <u>Give most recent employer first</u>.

1				Ye	ars
Name of F	irm N	ame of Owner	Location	from	to
Worked as	(Apprentice, Journey	yman, Master Plumber)			
Principal ty	pe of work done				
2.					
2Name of F	irm N	ame of Owner	Location	from	to
Worked as	(Apprentice, Journey	yman, Master Plumber)			
Principal ty	pe of work done				
If more employer,	list on back of applic	cation.			
It is understood the	at the Board may inq	uire into your trade and bus	siness experience, as w	ell as your cha	racter.
Have you ever bee	n in business as a Ma	aster Plumber under your o	wn name?		
Where?		For how	long?		
Have you ever bee	n granted a permane	nt license by any other com	nmunity? (if Yes	, provide copy of	license
		When?			,
	SINESS REFERENC				
	Name	City		Phone No.	
1					
2.					
3.					
CHARACTER RE					
	Name	City		Phone No.	
1					
2.					
3.					

If a license is granted what type of work would you perform? (Check below)

Piping	g new d	wellings	Piping Commerci	al Buildings	
Instal	lation of	f Appliances	Repair Work	Other	
If a license is	granted	l what are your intention	ons? (Check below)		
Conti	nue pres	sent practice outside of	f Chambersburg		
Estab	lish bus	iness in your own nam	e in Chambersburg		
Work	for a pr	resently established bu	siness in Chambers	burg	
(				Name of Owner	)
	Name	of Business		Name of Owner	
Work	as mair	ntenance man in indust	trial or other establis	shment	-
Perfo	rm sing	gle plumbing contract	t	(SPECIAL LICENS	SE)
Perfo				(SPECIAL LICENS	SE)
Perfo	Addre	255			_
Perfo	Addre Descr	ess iption of job			
	Addre Descr Estim	ess iption of job ated duration of job			
	Addre Descr Estim	ess iption of job ated duration of job h the Plumbing Code c	of the Borough of Cl		
Are you fami	Addre Descr Estim liar with	ess iption of job ated duration of job h the Plumbing Code of A fee of \$50.00 as re	of the Borough of Cl equired by the Borou	hambersburg? ugh Plumbing Code is payab	

Date

Signature