

**PUBLIC PROTECTION CABINET
DEPARTMENT OF HOUSING, BUILDINGS AND CONSTRUCTION
LICENSING BRANCH
500 MERO STREET
FRANKFORT, KENTUCKY 40601-5412
(502) 573-2002 FAX (502) 573-1598**

APPLICATION FOR LICENSE AS A MASTER PLUMBER

I hereby apply for license as a Master Plumber and certify that I am eighteen (18) years of age or older. The prorated Master Plumber license fee of \$250.00, payable to Kentucky State Treasurer, is enclosed.

ALL QUESTIONS ON THE APPLICATION MUST BE ANSWERED. PLEASE TYPE OR PRINT ANSWERS.

<p>1. Are you an engineer registered in Kentucky?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you have experience in mechanical engineering?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, list your experience on a separate sheet and attach it to this application.</p>	<p>5. NAME: _____ (First) _____ (Initial) _____ (Last) _____</p> <p>Address: _____ (Street, Route or Box Number)</p> <p>City _____ State _____ Zip _____</p> <p>County: _____</p> <p>Date of Birth: _____</p>
<p>2. Are you a Master Plumber in another state?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, list each state and date you were first licensed and provide a copy of each active license:</p> <p>Date _____ _____ Date _____ _____ Date _____</p>	<p>6. Were you licensed as a Journeyman before you received a Master Plumber's License in another state?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> N/A (Not previously licensed in another state.)</p> <p><input type="checkbox"/> No</p>
<p>3. Are you currently licensed as a Journeyman in KY or in another state?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, list each state and date you were first licensed and provide a copy of each active license:</p> <p>Date _____ _____ Date _____ _____ Date _____</p>	<p>7. Are you a U.S. Citizen or a resident alien authorized to work in the United States?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>8. Have you previously applied for Master Plumber's License in the State of Kentucky? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Date of Last Examination: _____ _____ Month / Year</p> <p>Results of Examination: _____</p>
<p>4. How long have you worked at the business of Plumbing?</p> <p>_____ Months _____ Years</p>	

9. State the extent of your education (including training, trade school, correspondence courses, etc.).

10. Give name and complete address of your last three employers.

Name of Employer: _____ From _____, 20 ____.

Address: _____ To _____, 20 ____.

Name of Employer: _____ From _____, 20 ____.

Address: _____ To _____, 20 ____.

Name of Employer: _____ From _____, 20 ____.

Address: _____ To _____, 20 ____.

THIS SECTION MUST BE INITIALED:

I have been convicted of a felony or a misdemeanor in the Commonwealth of Kentucky, any other state, or the United States. **YES** or **NO** . If have been convicted of a felony or misdemeanor, you might not be able to receive a Master Plumber license at this time. Please contact the Plumbing Division for further information.

Applicant's Signature: _____

Phone: _____
(Area Code) Number

Email: _____

**Attach a passport-sized,
color photograph of
applicant taken within
the last six months.
(Unless provided on
examination registration
form)**

No Staples Please

Month You Are Activating Master License

Your Birth Month

	JAN	FEB	MAR	APRIL	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC
JAN	\$250	\$230	\$209	\$188	\$167	\$146	\$376	\$355	\$334	\$313	\$292	\$271
FEB	\$271	\$250	\$230	\$209	\$188	\$167	\$146	\$376	\$355	\$334	\$313	\$292
MAR	\$292	\$271	\$250	\$230	\$209	\$188	\$167	\$146	\$376	\$355	\$334	\$313
APRIL	\$313	\$292	\$271	\$250	\$230	\$209	\$188	\$167	\$146	\$376	\$355	\$334
MAY	\$334	\$313	\$292	\$271	\$250	\$230	\$209	\$188	\$167	\$146	\$376	\$355
JUNE	\$355	\$334	\$313	\$292	\$271	\$250	\$230	\$209	\$188	\$167	\$146	\$376
JULY	\$376	\$355	\$334	\$313	\$292	\$271	\$250	\$230	\$209	\$188	\$167	\$146
AUG	\$146	\$376	\$355	\$334	\$313	\$292	\$271	\$250	\$230	\$209	\$188	\$167
SEPT	\$167	\$146	\$376	\$355	\$334	\$313	\$292	\$271	\$250	\$230	\$209	\$188
OCT	\$188	\$167	\$146	\$376	\$355	\$334	\$313	\$292	\$271	\$250	\$230	\$209
NOV	\$209	\$188	\$167	\$146	\$376	\$355	\$334	\$313	\$292	\$271	\$250	\$230
DEC	\$230	\$209	\$188	\$167	\$146	\$376	\$355	\$334	\$313	\$292	\$271	\$250

*To determine the appropriate prorated fee amount, please find the month in which your application will be post-marked and select your birth month. For example, if you are applying in February and your birth month is in July, you would pay \$355.