



**PUBLIC PROTECTION CABINET
DEPARTMENT OF HOUSING, BUILDINGS AND CONSTRUCTION
DIVISION OF HEATING, VENTILATION, AND AIR CONDITIONING
500 MERO STREET
FRANKFORT, KENTUCKY 40601-5412
(502) 573-0395 FAX (502) 573-1401**

HVAC EXAMINATION REGISTRATION FORM

I hereby register for examination as a master heating, ventilation, and air conditioning ("HVAC") contractor or journeyman HVAC mechanic. The exam fee of \$150.00 for a master HVAC contractor examination, or exam fee of \$50.00 for a journeyman HVAC mechanic examination, payable to Kentucky State Treasurer, is enclosed. *PLEASE TYPE OR PRINT ANSWERS.*

Please check the box as applicable:

Master HVAC Contractor Examination

Journeyman HVAC Mechanic Examination

Name: _____

Address: _____ City: _____

County: _____ State: _____ Zip: _____

Phone Number: _____ Email: _____

For Office Use Only:

Date of Examination: _____, 20 ____.

Score: _____ %

Remarks: _____

**Attach a passport-sized,
color photograph of
applicant taken within
the last six months.**

No Staples Please