Commonwealth of Virginia Department of Professional and Occupational Regulation 9960 Mayland Drive, Suite 400 Richmond, Virginia 23233-1485 (804) 367-8511 www.dpor.virginia.gov



Board for Contractors RESIDENTIAL TRADESMAN EXAM & LICENSE APPLICATION

A check or money order payable to the <u>TREASURER OF VIRGINIA</u>, or a completed <u>credit card insert</u> must be mailed with your application package. APPLICATION FEES ARE NOT REFUNDABLE.

			Select the o	lesignation(s) for wh	ich you are applying.							
			Trade	Designations		Examination						
						1005						
						Fee \$130.00						
			Residential Plu	mber Tradesman (PLI	3)							
		Residential He	ating, Ventilation,	and Air Conditioning	Tradesman (HVAC)							
	Any applicant performing work over \$1,000 must contact the Board for Contractors to obtain a Virginia Contractors License. Note: If more than one trade is selected, the license will <u>not</u> be issued until all exams/qualifications are met.											
	Provide a <u>current or previously</u> issued license by Department of Professional and Occupational Regulation or from the Virginia Board for Contractors - (if applicable)											
	Virginia L	icense Number				Expiration Date						
1.	1. Full Legal Name (As it appears on your government issued ID or other legal documentation.)											
	Last (require	d)	First	(required)	Middle		Generation					
		,			•	Conv must be lead						
	** <u>Required Attachment</u> : Provide a copy of your government issued ID. Copy must be legible.											
2.				ication numbers*:								
	Soci	al Security Numbe	r and/or			-						
	Virgi	nia DMV Control N	umber									
	➤ Enter the second	ne same identification nu	mber as used on ex	amination, previous app	ications or licenses on file	with the department.						
						e in a business, trade, professi Department of Motor Vehicles.	on or occupation issued					
3.	Date of Bir	th	(N	lust be at least 18 y	ears of age.)							
•		MM/DD/										
4.	Maiden or	Former Name(s)										
5.	Mailing Ad	dress (PO Box ac	cented)									
5.	-	nailing address will be	. ,									
		nted on the license.		City		State	Zip Code					
							·					
6.												
	PHYS	ICAL ADDRESS RE	QUIRED									
	ETS											
BOARD USE ONLY				City		State	Zip Code					
OFFICE	DATE	FEE	TRANS CODE	ENTITY #	FILE	E #/LICENSE #	ISSUE DATE					
USE ONLY					2709							

7.	Contact Numbers	Primary Telephone	Alternate Telephone			Fax					
8.	Email Address										
	Email address is considered a public record and will be disclosed upon request from a third party.										
9.	Employer's Name										
	Employer's Virginia (Contractor's License No.	(if available)	2 7							
	Employer's Street Ac	Jdress									
		City			State	Zip Code					
10.	Do you hold a <u>current</u> Tradesman license, certification or registration issued by any (excluding Virginia) local, state or national regulatory body? This information may be used to qualify you for the tradesman examination. No Yes If yes, complete the following table. Attach a copy of each Certification/Letter of Good Standing [•] if you want this license reviewed for experience or reciprocity.										
	State/Jurisdiction	Trade Designation	Examination	Residential (R)	License, Certification or	Expiration					
			Yes (Y) or No (N)		Registration No.	Date					
11.	 Certifications of Licensure/Letter of Good Standing prepared by the state board or regulatory body must include: 1) the license/certification/ registration number; 2) the initial date of licensure; 3) the expiration date of the license or renewal fee; 4) the means of obtaining licensure (i.e. exam, reciprocity, etc.) <u>and</u> 5) all closed disciplinary actions resulting in violations or undetermined. Which of the following requirements have you met in order to qualify for a residential tradesman exam license? Select only <u>one</u>. Indicate your experience, vocational training and education. 										
	Two years of practical experience in the trade and 160 hours of formal vocational training in the trade. Required attachments: Attach a completed Individual Experience Verification Form and certification(s) of completion of official transcript(s)										
	Three years of practical experience in the trade and 120 hours of formal vocational training in the trade. Required attachments: Attach a completed <u>Individual Experience Verification Form</u> and certification(s) of completion of official transcript(s).										
	Four years of practical experience in the trade and 80 hours of formal vocational training in the trade. Required attachments: Attach a completed <u>Individual Experience Verification Form</u> and certification(s) of completion or official transcript(s).										
	Five years of practical experience in the trade and 40 hours of formal vocational training in the trade. Required attachments: Attach a completed Individual Experience Verification Form and certification(s) of completion or official transcript(s).										
	•	s of practical experience i									
	Required Attachments: Attach a completed Individual Experience Verification Form.										
	Commonwealth	•	eu as a riesiu		ian by a governing bo	buy outside the					
	Required Attachments: Attach a Certification/Letter of Good Standing and a copy of a currently valid Reside Tradesman license or certification										
	certification/registr	Licensure/Letter of Good Star ration number; 2) the initial d e (i.e. exam, reciprocity, etc.) <u>a</u>	ate of licensure; 3)	the expiration dat	e of the license or renewal fe	e; 4) the means of					

- 12. Have you ever been subject to a <u>disciplinary action</u> taken by <u>any</u> (including Virginia) local, state or national regulatory body?
 - No 🗌
 - Yes If yes, complete the Disciplinary Action Reporting Form.
- 13. A. Have you ever been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of any <u>felony</u>? Any plea of nolo contendere shall be considered a conviction.
 - No
 - Yes If yes, complete the <u>Criminal Conviction Reporting Form</u>.
 - B. Have you ever been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of any <u>non-marijuana misdemeanor</u>?
 - No 🗌
 - Yes If yes, complete the <u>Criminal Conviction Reporting Form</u>.
- 14. If the requested exam is offered in a different language, which language would you prefer?
 - English or Spanish
 - > If this question is not answered, the exam language will default to English.

By signing this application, you acknowledge that if you are not a Virginia resident, or move outside of Virginia while you hold a Virginia Contractors License, you understand that this application serves as a written power of attorney, whereby you appoint the Director of the Department of Professional and Occupational Regulation, and his/her successors in office, to be your true and lawful agency and attorney-in-fact, in your stead, upon whom all legal process against and notice to you may be served and who is hereby authorized to enter an appearance on your behalf in any case or proceedings arising out of the trade or profession practiced; and that by submitting this application, you hereby agree that any lawful process against you which is duly served on said agent and attorney-in-fact shall be of the same legal force and validity as if served upon you.

18-VAC-50-30-30.7 of the *Board for Contractors Individual License and Certification Regulations* states, "Each nonresident applicant for a license or certificate shall file and maintain with the department an irrevocable consent for the department to serve as service agent for all actions filed in any court in this Commonwealth. In those instances where service is required, the director of the department will mail the court document to the individual at the address of record."

- 15. By signing this application, I certify the following statements:
 - I am aware that submitting false information or omitting pertinent or material information in connection with this application will delay processing and may lead to license revocation or denial of license.
 - I will notify the Board of any changes to the information provided in this application prior to receiving the requested license, certification, or registration including, but not limited to any disciplinary action or conviction of a felony or misdemeanor (in any jurisdiction).
 - I authorize the Department to verify information concerning me or any statement in this application from any person, or any source the department may contact. I also agree to present any credentials or documents required or requested by the Department.
 - I authorize any federal, state or local government agency, current or former employer, or other individual or business to release information which may be required for a background investigation.
 - I have read, understand and complied with all the laws of Virginia related to this profession under the provisions of Title 54.1, Chapter 11, of the Code of Virginia and the Virginia Board for Contractors Individual License and Certification Regulations.

Signature

Date

**<u>Required Attachment</u>: Provide a copy of your government issued ID. Copy must be legible.