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 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 designation(s) for which you are applying and one method of licensure for each.

	Methods of Licensure						
Trade Designations	Examination	Reciprocity	Apprenticeship Program	Card Exchange			
	1005	1021	1022	1023			
	Fee \$150.00	Fee \$150.00	Fee \$150.00	Fee \$110.00			
Journeyman Electrical (ELE)							
Master Electrical (ELE)							
Journeyman Plumbing (PLB)							
Master Plumbing (PLB)							
Journeyman Heating, Ventilation & Air Conditioning (HVA)							
Master Heating, Ventilation & Air Conditioning (HVA)							
Journeyman Gas Fitting (GFC)							
Master Gas Fitting (GFC)							
Journeyman Liquefied Petroleum Gas Fitter (LPG)							
Master Liquefied Petroleum Gas Fitter (LPG)							
Journeyman Natural Gas Fitter Provider (NGF)							
Master Natural Gas Fitter Provider (NGF)							

Note: If more than one trade is selected, the license will not be issued until all exams/qualifications are met.

	Provide a <u>curre</u> Virginia Board fo	•			t of Profession	onal and Occupational Regulat	tion or from the
	Virginia Lice	nse Number [				Expiration Date	
1.	Full Legal Nar	ne (As it appe	ars on your gove	ernment issued ID o	r other legal d	ocumentation.)	
	Last (required)		First	(required)		Middle	Generation
	<u>Required</u>	I Attachment: F	Provide a copy o	f your government i	ssued ID. Co	py must be legible.	
2.	Provide at lea	st <u>one</u> of the fo	ollowing identifi	cation numbers*:			
	Social S	ecurity Number	<b>r</b> and/or		[		
	<u>Virginia</u>	DMV Control Nu	umber				
	Enter the sa	me identification nu	mber as used on exa	amination, previous appli	cations or license	es on file with the department.	
						o engage in a business, trade, profession Virginia Department of Motor Vehicles.	or occupation issued
3.	Date of Birth		(M	ust be at least 18 ye	ears of age.)		
		MM/DD/\	YYY				
4.	Maiden or For	mer Name(s)					
BOARD USE ONLY	ETS						
OFFICE	DATE	FEE	TRANS CODE	ENTITY#		FILE #/LICENSE #	ISSUE DATE
USE					2710		

5.	Mailing Address (PO The mailing addre printed on the I	ess will be											
			City									ate	Zip Code
6.	Street Address (PO B	Box <u>not</u> accepted)		Check here if Str	eet Addr	ess is the	same	as the N	Mailin	g Ad	dress I	isted at	oove.
	PHYSICAL ADDR	RESS REQUIRED	-										
			-										
7	0 ( (N) )		City								St	ate	Zip Code
7.	Contact Numbers	Primary Teleph	none		Alte	rnate Tele	ohone	<del></del>		_			Fax
8.	Email Address	, ,				,							
0.	Email / Idai 000	Email address	s is co	nsidered a public r	ecord a	ınd will be	disc	closed u	ipon	requ	est fr	om a th	hird party.
9.	Employer's Name												
	Employer's Virginia (	Contractor's License N	Vo. (	if available)	2 7	.	Τ						
	Employer's Street Ad			available)	<u> </u>						ı		
	Lilipioyei s Street Ad												
		City									St	ate	Zip Code
10.	Do you hold a curre		م م	rtification or rec	iietratii	on issue	ad h	v anv	(64)	alud	ina \	/irain	ia) local state or
10.	national regulatory be			•					•		-	_	ia) iocai, state oi
	No 🗆	,	,	•	, ,								
	Yes If yes	s, complete the follow	wing t	table. Attach a	сору с	of each	Cer	tificatio	on/L	.ette	er of	Good	l Standing <sup>♦</sup> if you
	want	this license reviewed	d for	experience or r	ecipro	city.							
	State/Jurisdiction	Trade Designation	1	Examination		eyman (	J)	Licens					Expiration
				Yes (Y) or No (N)	Ma	ster (M)		Re	egisti	ratio	n No	•	Date
•	Certifications of Licensur												
	registration number; 2) the exam, reciprocity, etc.) are								; 4) t	ne n	neans	OT ODI	taining licensure (i.e.
11.	Are you applying for								issu	ed	by th	e Vir	ginia Department
	of Housing and Com	munity Development											
	prior to July 1, 1978?	)											
	No 🗌						,,	S				\	
	Yes If yes,	you may exchange y	our l	ocality issued c	ard on	ily once	. (3	skip to	que	estic	on #1	17)	
12.	For Journeyman app	olicants only:											
	A. Did you succe	essfully complete an	appre	enticeship progr	am in	Virginia	?						
	No 🗆												
	Yes	If yes,											
		1) your registered A	Appre	nticeship Spon	sor in	Virginia	M/	AY be	a s	pon	sor t	hat h	as been granted
		an exemption to exa	amina	ition. <b>DPOR wi</b>	l verif	fy that	stat	us. Pro	ovid	e na	ame	of the	e sponsor:
				prenticeship A									

	B. Dia ya	ou successiully	complete an apprenticeship pro	gram in anou	ier state?				
	No								
	Yes	progra docun	<ul> <li>, 1) attach official document frams) verifying the apprenticeship nent signed by the apprenticeship on #17)</li> </ul>	program spo	onsor is regist	ered in their	state a	nd; 2) a	ttach
13.	licensed as a	ntractor who h Class B contra	eld a Class B Registration in the actor?	e trade prior to	o January 1,	1991 and ha	s been	continuo	ously
	No 🗌	16 11 1	V			<del>                                     </del>	$\overline{}$		П
	Yes	if yes, list yo	ur Virginia Contractor License No	umber:	2   7	(Skip to quest	 ion #17)		
14.	Did you nass	a Class Δ Viro	ginia Board for Contractor trade e	avamination n	rior to Tanuar		····/		
17.	No	a Olass A VIIg	ginia board for contractor trade t	szamination p	nioi to dandai	y 1, 1001:			
	Yes	If yes, select (Skip to ques	the trade(s) in which you were to tion #17)	ested and give	e the examina	ation date(s).			
		Electric	al (ELE)	Exam Date					
		Plumbir	ng (PLB)	Exam Date					
		Gas-Fit	ting (GFC)	Exam Date					
		Heating	g, Ventilation & Air Conditioning (HVA)	Exam Date		•			
		Liquefie	d Petroleum Gas Fitter (LPG)	Exam Date					
		Natural	Gas Fitter Provider (NGF)	Exam Date					
15.	Which of the	following req	uirements have you met in ord	er to qualify	for a <b>journey</b>	<b>man</b> exam	tradesi	man lice	nse?
	Select only o								
	JOURNEYM	AN APPLICAN	NTS ONLY: Indicate your expe	erience, voca	tional trainin	g and educa	ation.		
	-		experience in the trade and 240 has a completed Individual Examples official transcript(s)			•		f completi	ion or
			xperience in the trade and 160 h Attach a completed Individual Exofficial transcript(s).					f complet	ion or
		•	perience in the trade and 80 hou			•			
	Require	d attachments:	Attach a completed <b>Individual Ex</b> official transcript(s).	perience Veri	fication Form	and certificati	on(s) of	completi	on or
	☐ Seven or	more years of	practical experience in the trade	and 40 hours	s of formal voc	cational train	ing in tl	he trade.	
	•		Attach a completed Individual Exorptical transcript(s).				. ,	·	
			Natural Gas Fitters ONLY F	•			30 hou	rs of forr	mal
	vocationa <b>Require</b>	d Attachments	quefied petroleum gas fitters and : Attach a completed <u>Individual Ex</u> official transcript(s).	naturai gas ti xperience Veri	ification Form	and certificati	on(s) of	f completi	ion or
			ertificate of completion from at le						
			ty college or technical school an	d two years o	of practical ex	perience in t	he trad	le for wh	iich
		is requested. d Attachments	: Attach a completed Individual Ex	xperience Veri	ification Form	and certificati	on(s) of	f complet	ion or
	☐ Rachelor'	s dearee or	official transcript(s). certificate of completion from	an accredite	d college or	university i	n an 4	engineer	ina
		•	trade and one year of practical		•	•		•	_
			: Attach a completed Individual Exofficial transcript(s).						

	in the trade.  Required Attachment: Attach a completed Individual Experience Verification Form.
	Individuals currently certified or licensed as a journeyman or master by governing body located outside the Commonwealth of Virginia. ◆
	<b>Required Attachments:</b> Attach a Certification/Letter of Good Standing and a copy of a currently valid journeyman or master license or certification.
	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.) and 5) all closed disciplinary actions resulting in violations or undetermined.
16.	Which of the following requirements have you met in order to qualify for a <b>master</b> exam tradesman license? Select only <b>one</b> .
	MASTER APPLICANTS ONLY: Indicate your experience, vocational training and education.
	☐ One year of practical experience as a licensed journeyman in the trade.
	Provide your VA License Number 2 7
	Required Attachment: Attach a completed Individual Experience Verification Form.
	☐ Three years of practical experience as a Virginia licensed residential HVAC or plumber tradesman.
	Required Attachment: Attach a completed Individual Experience Verification Form.
	Nine years of practical experience in the trade verified by individuals who observed the applicant's work in the trade.
	Required Attachment: Attach a completed <u>Individual Experience Verification Form</u> .
	☐ Individuals currently certified or licensed as a journeyman or a master by governing body located outside the Commonwealth of Virginia.
	<b>Required Attachments:</b> Attach a Certification/Letter of Good Standing and a copy of a currently valid master license or certification.
	<ul> <li>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.) and 5) all closed disciplinary actions resulting in violations or undetermined.</li> </ul>
17.	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 <u>Disciplinary Action Reporting Form.</u>
18.	A. Have you ever been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of any <b>felony</b> ?
	No
	B. Have you ever been convicted or found guilty, regardless of the manner of adjudication, in any jurisdiction of the United States of any non-marijuana <u>misdemeanor</u> ?
	No Yes If yes, complete the <u>Criminal Conviction Reporting Form</u> .
19.	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.

- 20. 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	