

**PLEASE READ THIS INFORMATION BEFORE COMPLETING YOUR APPLICATION.**

**You MUST have your employer that holds the Master Plumber License signed and a copy of his or her Master Plumber License MUST be submitted with this application.**

**If your employer will not sign and will not give you a copy of his or her Master Plumber License you MUST submit copies of your W2.**

**If you should have any questions, please call (610) 437-7591 or (610) 437-7592**

**PLEASE READ THIS INFORMATION BEFORE CONTINUING YOUR APPLICATION.**

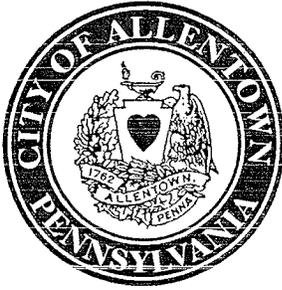
**YOUR APPLICATION MUST BE FILLED OUT COMPLETELY AND CORRECTLY BEFORE IT WILL BE PROCESSED.**

**IF YOUR APPLICATION IS REJECTED DUE TO INCOMPLETE OR ERRONEOUS INFORMATION, YOU WILL BE REQUIRED TO PAY THE APPLICATION FEE AGAIN.**

**Deadline: Friday, March 18, 2011**

**Exam: Monday, May 02, 2011**

**PLEASE READ THIS INFORMATION BEFORE COMPLETING YOUR APPLICATION.**



CITY OF ALLENTOWN  
 BUREAU OF BUILDING STANDARDS & SAFETY - INSPECTIONS DIVISION  
 435 HAMILTON STREET - RM 428 or 4<sup>TH</sup> FLOOR  
 ALLENTOWN, PENNSYLVANIA 18101-1699  
 (610) 437- 7591

Deadline: Friday, March 18, 2011  
Exam: Monday, May 02, 2011

**APPLICATION - MASTER PLUMBER LICENSE TEST - \$85.00**

Applications must be filed at least forty-five (45) days prior to date of examinations as hereinafter provided.  
 P125.1

**QUALIFICATIONS - REQUIREMENTS**

Every applicant for a Master Plumber License shall be over the age of twenty-one (21) years. At the time of application, every applicant for a Master Plumber License shall be a least four (4) years of practical experience on the installation of drainage, waste, vent and water systems with a Registered Master Plumber or its equivalent. In addition, every applicant for a Master Plumbers License shall have at least one (1) year experience as a Journeyman Plumber with a Registered Master Plumber or its equivalent.

ORDINANCE #14190 PASSED 06/04/04.

\*\*\*\*\*

**PLEASE PRINT OR TYPE CLEARLY AND COMPLETE FILLED OUT:**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE: ( ) \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

Month DAY YEAR

\*\*\*\*\*

Application and proper fee \$85.00 shall be received by the Bureau of Building Standards & Safety Inspections - Division 435 Hamilton Street - Room 428 Allentown, PA 18101-1699.

\*\*\*\*DEADLINE FOR APPLICATION TO BE RETURNED IS: FRIDAY, MARCH 18, 2011\*\*\*\*

\*\*\*\*\*EXAM: MONDAY, MAY 02, 2011\*\*\*\*\*

MASTER PLUMBER LICENSE: \_\_\_\_\_ FEE REC'D: \_\_\_\_\_ DATE: \_\_\_\_\_

**\*\*\*\*\*IMPORTANT\*\*\*\*\***

The applicant shall obtain the signature(s), and address(es) and telephone number(s) of the Registered Master Plumber(s) or its equivalent with whom the applicant as a Registered Journeyman has had at least one (1) year of practical experience in the installation of drainage, waste, and vent and water system.

N:\PLUMBER\_BOARD\MASTER TEST APPLICATION.FRM

REV 01/21/2009

City Hall • 435 Hamilton Street • Allentown, PA 18101-1699

**PLEASE PRINT OR TYPE CLEARLY AND COMPLETELY FILLED OUT:**

**\*\*\*\*If additional space is needed please attach a sheet to the application\*\*\*\***

I, the undersigned, attest that the applicant: \_\_\_\_\_  
has been employed at the installation of drainage, waste, vent and water systems from

DATE: \_\_\_\_\_ TO DATE: \_\_\_\_\_ BY: \_\_\_\_\_

NAME: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMPLOYER'S SIGNATURE: \_\_\_\_\_

\*\*\*\*\*

I, the undersigned, attest that the applicant: \_\_\_\_\_ has  
been employed at the installation of drainage, waste, vent and water systems from

DATE: \_\_\_\_\_ TO DATE: \_\_\_\_\_ BY: \_\_\_\_\_

NAME: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMPLOYER'S SIGNATURE: \_\_\_\_\_

\*\*\*\*\*

I, \_\_\_\_\_, hereby declare that the foregoing statements are true to the best of my  
knowledge and belief:

DATE: \_\_\_\_\_ APPLICANT'S SIGNATURE: \_\_\_\_\_

NOTARY PUBLIC SEAL

DATE: \_\_\_\_\_ NOTARY SIGNATURE: \_\_\_\_\_

Any false statements contained in this application shall be in direct violation of the City Of Allentown  
ORDINANCE #14190 - PASSED 06/04/04 as amended, governing the licensing of plumbers and inspection of all  
plumbing within the City Of Allentown.

**Deadline: Friday, March 18, 2011**

**Exam: Monday, May 02, 2011**