



**City of Allentown**  
Bureau of Building Standards & Safety  
Inspections Division  
435 Hamilton Street – 4<sup>th</sup> Floor  
Allentown, PA 18101-1699  
610.437.7591

**Application to Take the Examination to Become a Licensed Journeyman Plumber**

Applications must be filed at least forty-five (45) days prior to the date of examination, as herin provided. P125.1

Every applicant for a Journeyman Plumber License shall be over the age of twenty-one (21). At the time of application, every applicant shall have at 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.

ORDINANCE #14190, passed 06/04/2004

**EXAM DATE: Tuesday, May 14, 2019**

**DEADLINE FOR APPLICATION: Friday, March 29, 2019**

**GENERAL INSTRUCTIONS**

Applications must be neatly printed or typewritten, and signed. Applications must be filled in completely and correctly. *If your application is rejected due to incomplete or erroneous information, you will be required to reapply and pay the application fee again.*

Include a signed copy of your employer's Master Plumber License. If your employer will not comply, you must provide a copy of your W2 form.

If you should have any questions, please call 610.437.7591 or 610.437.7592.

**APPLICATION FEE:** An application fee of \$60 must accompany this application. This fee should be paid in the form of a check or money order made payable to **City of Allentown**. This application fee is non-refundable.

<b>NAME:</b>	<b>DATE OF BIRTH mm/dd/yyyy:</b>
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<b>EMAIL ADDRESS:</b>
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<b>STREET ADDRESS:</b>
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<b>CITY:</b>	<b>STATE:</b>	<b>ZIP CODE:</b>	<b>PHONE NO:</b>
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I hereby declare that the information contained in this application is true, to the best of my knowledge and belief.

<b>DATE:</b>	<b>SIGNATURE</b>
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**EMPLOYER STATEMENT**

I, the undersigned, attest that the applicant, \_\_\_\_\_,  
has been employed by me, and is proficient at the installation of drainage, waste, vent, and water systems during  
the time period beginning \_\_\_\_\_ and ending \_\_\_\_\_.

**IF ADDITIONAL SPACE IS NEEDED, PLEASE ATTACH A SEPARATE SHEET TO THE APPLICATION.**

<b>NAME:</b>	<b>MASTER PLUMBER LICENSE #:</b>
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<b>COMPANY NAME:</b>
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<b>STREET ADDRESS:</b>
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<b>CITY:</b>	<b>STATE:</b>	<b>ZIP CODE:</b>	<b>PHONE NUMBER:</b>
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<b>SIGNATURE:</b>
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**NOTARY**

<b>NAME OF NOTARY:</b>	<b>NOTARY SIGNATURE:</b>
<b>NOTARY SEAL:</b>	<b>DATE:</b>

Any false statements contained in this application shall be in direct violation of the City of Allentown Ordinance #14190, passed on June 4, 2004, as amended, governing the licensing of plumbers and inspection of all plumbing within the City of Allentown.

The following is for internal use only.

<b>JOURNEYMAN PLUMBER LICENSE:</b>	<b>FEE REC'D:</b>	<b>DATE:</b>
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