



# Water Filtration Application Information

**Please read instructions below carefully:**

1. Submit a legible copy of a valid driver’s license or state identification with the application.
2. Complete, sign and submit the enclosed application form.
3. Submit a check or money order in the amount of \$75 (application fee) made payable to the RI Dept. of Labor and Training along with the application. Payment is non-refundable.
4. Submit a separate, detailed statement on company letterhead stating that the contractor has been incorporated or has been registered to do business with the State of Rhode Island for the past three (3) years designating the installation of water-filtration/treatment systems as a provided service; **OR** stating that the installer has been employed for the past three (3) years by a contractor that has been incorporated or registered to do business with the state of Rhode Island designating the installation of water-filtration/treatment system as a provided service. Statement must be notarized.

**Note:** *Incomplete applications will not be processed and will be returned to the applicant. All required documentation also must be included with the application.*

**RI General Law Information**

§ 5-20-5.2 “Commercial water filtration/treatment system work” defined. [Effective January 1, 2017] Commercial water filtration/treatment system work,” as used in this chapter, means any alteration, installation or repair of water filtration/treatment systems in which the piping exceeds one and one-half inches (1.5”) or the flow rate exceeds eighty (80) gallons per minute.

§ 5-20-3.3 “Journeyman water filtration/treatment system installer” defined. [Effective January 1, 2017]. Journeyman water filtration/treatment system installer,” as used in this chapter, means a person who has performed all phases of a project under the supervision of a master water filtration/treatment system installer licensee for a period of not less than one year. Journeymen shall not be permitted to apply for a water filtration/treatment system installation permit.

§ 5-20-4.2 “Apprentice water filtration/treatment system installer” defined. [Effective January 1, 2017]. Apprentice water filtration/treatment system installer,” as used in this chapter, means a person hired to perform all phases of a water filtration/treatment system project under the supervision of a master water filtration/treatment system installer licensee or a licensed journeyman water filtration/treatment system installer for a period of one year.

Application Fee (non-refundable)		
License	Computer Code	Two-Year License Fee
Master water filtration/treatment system installer	56	\$240
Journeyman water filtration/treatment system installer	57	\$72
Apprentice water filtration/treatment system installer	58	\$20 (no test)

**Important:** *Complete and submit a Ratio Sheet on company letterhead. Ratio Sheet must also be notarized.*





Continued from previous page

Education (list all education and schooling received in the plumbing and irrigating trades):

1. Institution Name: \_\_\_\_\_  
Dates Attended: \_\_\_\_\_ Degree/Diploma: \_\_\_\_\_  
*From To*

2. Institution Name: \_\_\_\_\_  
Dates Attended: \_\_\_\_\_ Degree/Diploma: \_\_\_\_\_  
*From To*

3. Institution Name: \_\_\_\_\_  
Dates Attended: \_\_\_\_\_ Degree/Diploma: \_\_\_\_\_  
*From To*

List all valid licenses you currently hold with the RI Department of Labor and Training:

1. Type of Licence: \_\_\_\_\_ 2. Type of Licence: \_\_\_\_\_

\_\_\_\_\_  
*Applicant Signature* *Date*

\_\_\_\_\_  
*Notary Signature* *Date*

\_\_\_\_\_  
*Expiration Date*

**SUBMIT APPLICATION AND PAYMENT TO:  
RI Department of Labor and Training  
Div. of Workforce Regulation and Safety  
Professional Regulation Unit  
1511 Pontiac Avenue, PO Box 20247  
Cranston, RI 02920-0943**

If you fail to pass your examination, you may request a review, in writing, to the Division of Professional Regulation within 30 days of failure notice.

**For Office Use Only - Please Do Not Write In This Area**

Test Fee Paid	Check	Credit	MO	Division/Commission Approval for Test
_____				_____
Comments/Date Approved _____				
Date Paid _____				



# RI Department of Labor and Training Workforce Regulation and Safety

Apprenticeship • Labor Standards • Occupational Safety • Prevailing Wage • Professional Regulation

## THIS IS AN IMPORTANT NOTICE

If you do not understand the enclosed notice, please contact this office in the RI Department of Labor and Training, Division of Workforce Regulation and Safety to speak with a Spanish interpreter. Spanish interpreters are available to assist you. If you are attending a hearing, you cannot use your own interpreter. The Division of Workforce Regulation and Safety will provide an interpreter for you. It is important that you call the Division of Workforce Regulation and Safety at (401) 462-8570 or (401) 462-8580, at least seven (7) days prior to your hearing to request an interpreter.

The Division of Workforce Regulation and Safety is responsible for providing interpreter services at no cost to you. You are responsible for requesting these services in accordance with the procedures outlined in this notice.

### **Please Note:**

Interpreters are available to assist customers in languages other than Spanish. Please contact the Division of Workforce Regulation at (401) 462- 8580 or (401) 462-8570 to request an interpreter or written translation in a language other than Spanish.

## AVISO IMPORTANTE

Si usted no entiende esta notificación, por favor contacte a la oficina de RI Departamento de Trabajo y Entrenamiento División de Workforce Regulation y Safety para hablar con un intérprete en Español. Interpretes en Español están disponibles para asistirle. Usted no puede usar su propio intérprete si va a asistir a una audiencia. Workforce Regulation y Safety le proveerá un intérprete a usted. Es importante que usted llame al Workforce Regulation y Safety al (401) 462-8570 o (401) 462-8580 por lo menos (7) días antes de su audiencia para solicitar un intérprete.

La División de Workforce Regulation y Safety es responsable de proveer servicios de interpretación sin costo alguno para usted. Usted es responsable de solicitar estos servicios de acuerdo con el procedimiento escrito en esta notificación.

### **Por Favor Observe:**

Interpretes estan disponible para asistir a clientes en idiomas, ademas del Español. Por favor contacte la de Division of Workforce Regulation, llamando al (401) 462-8580 o (401) 462-8570, para solicitar un interprete o para traduccion escrita en un idioma, ademas del Español.



## **RHODE ISLAND DEPARTMENT OF LABOR AND TRAINING**

1511 Pontiac Avenue, Cranston, RI 02920 • (401) 462-8000 • [www.dlt.ri.gov](http://www.dlt.ri.gov) • TTY via RI Relay 711

Equal Opportunity Employer • Auxiliary aids and services are available upon request to individuals with disabilities.

DLT esta en el programa/empleador de igualdad de oportunidades, ayudas auxiliares y hay servicios disponibles para personas incapacitadas que asi lo solicitase.