



PLUMBERS AND IRRIGATORS APPLICATION INSTRUCTIONS—PLEASE READ CAREFULLY

Applications that are incomplete or missing required documents will not be processed and will be returned to the applicant.

1. Submit a legible government-issued identification (e.g., driver's license or passport) must be attached to the application.
2. Submit the last two (2) pages of this packet with the application signed and **notarized**.
3. AN APPLICATION FEE OF **\$75.00** is required to process your application. This is a **NON-REFUNDABLE APPLICATION FEE**. Check or money order should be made payable to the RI Department of Labor and Training. (Credit cards accepted – in person only).
4. Must submit a separate, detailed, **NOTARIZED** statement, on company letterhead, signed by a present or past employer stating all work-related experience. ***** Please detail your work experience thoroughly *****
5. All Plumber Master applications require verification of experience in their respective trade for at least five (5) years and must possess a journeyperson's license. Plumber Journeyperson's License must be valid for at least one (1) year prior to the master's test. Plumber Journeyperson applications require verification of at least five (5) years experience in their respective trade, and 576 hours of related instruction approved by the Department of Labor and Training.
6. The examination to be administered consists of 50 multiple choice questions based on 2018 IPC (International Plumbing Code).
7. **For all Rhode Island Indenture Apprenticeship Journeyperson Testing Only**
A Certificate of Completion of Apprenticeship issued by the RI Dept. of Labor and Training Apprenticeship Office for all Indentured Apprentices applying for a Plumbing Journeyperson exams. An Apprentice Completion form can be obtained at: dlt.ri.gov/regulation-and-safety/professional-regulation/forms-and-applications
8. All out-of-state applicants must provide proof of current licensure from their respective state. A photocopy of the trade license is not accepted as proof.
9. All Irrigation Apprentices must submit a **notarized** letter on company letterhead with date of hire and job description.
10. All Irrigator Apprentices must complete the ratio sheet by Master Irrigator and must be signed.

Recommended Study Material: dlt.ri.gov/study-material

View your application status online: dltweb.dlt.ri.gov/profregsonline/ApplicationStatus

Ratio sheet: dlt.ri.gov/sites/g/files/xkgbur571/files/2024-08/Company_Ratio.pdf



RI Department of Labor and Training *Workforce Regulation and Safety*



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) 462-8580 at least seven (7) days prior to your hearing to request an interpreter.

The Division of Workforce Regulation and Safety is responsible to provide 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 to request an interpreter or written translation in a language other than Spanish.



Non-Refundable Processing Application Fee

	Computer Code	Application Fee	2 Year License Fee*
<u>PLUMBERS and IRRIGATORS:</u>			
Contractor Master	049	\$75	\$240
Master Plumber	050	\$75	\$240
Master Irrigator	053	\$75	\$240
Journeyman Irrigator	054	\$75	\$72
Apprentice Irrigator 1 Year Fee	055	No Test	No Fee
<u>OUT-OF-STATE APPLICANTS:</u>			
Journeyman Plumber	051	\$75	\$72
 Effective January 1, 2017, there are new licenses as part of plumbers. These licenses are being grandfathered until January 1, 2018, without examination:			
<u>RESTRICTED ENDORSEMENTS:</u>			
Master water-filtration/treatment-system installer	56	\$75	\$240
Journeyman water-filtration/treatment-system installer	57	\$75	\$72

* Individuals who achieve a passing score of 70 or greater will be invoiced for the License Fee.



PLUMBERS AND IRRIGATORS — APPLICATION FOR EXAMINATION

Application Must be Printed CLEARLY

Social Security Number: _____ Date of Birth: _____

Full Name (Last, First + Middle Initial): _____

Street Address: _____

City/Town: _____ State: _____ Zip Code: _____

Home or Mobile Telephone: _____ Email: _____

Exam Applying For: _____ Computer Code: _____

Do you need this exam in a language other than English? Yes No If yes, what language?

Employer: _____

If Self Employed, Company Name: _____

Employer Address: _____

City/Town: _____ State: _____ Zip Code: _____

Employer Telephone: _____

Applicant must answer all questions on both pages truthfully and swear to the same before a NOTARY PUBLIC. Penalties for false information are as itemized in the General Laws of Rhode Island and Addendum. Statement may be investigated and verified for truthfulness.

General Listing of Work History:

1. Name of Employer: _____	Type of Work: _____
• Dates Worked: From: _____	To: _____
2. Name of Employer: _____	Type of Work: _____
• Dates Worked: From: _____	To: _____
3. Name of Employer: _____	Type of Work: _____
• Dates Worked: From: _____	To: _____

Education - List all education and schooling that you have received in the plumbing and irrigation trade.

1. Location: _____	Degree/Diploma: _____
• Dates Attended: From: _____	To: _____
2. Location: _____	Degree/Diploma: _____
• Dates Attended: From: _____	To: _____
3. Location: _____	Degree/Diploma: _____
• Dates Attended: From: _____	To: _____

You must list any VALID LICENSES YOU NOW HOLD with the Department of Labor and Training.

1. Type of License: _____ 2. Type of License: _____ 3. Type of License: _____

Listed employers or customers may be sent forms to attest to the truthfulness of all statements on this application and these will have to be sent back to this division, properly notarized, before any action is taken on this licensing test application.

Public Notary Acknowledgement

In _____ on the _____ day of _____, 20_____,
before me personally appeared _____ to me known and known by me to be the party(ies)
executing the foregoing instrument, and he/she/they acknowledged said instrument, by him/her/they executed by them as their
free act and deed.

Applicant Signature: _____ Date: _____

Notary Signature and Seal: _____ Expiration Date: _____

Submit ONLY this page and the prior page with required documents to:

Rhode Island Department of Labor and Training
Division of Workforce Regulation and Safety
Professional Regulation Unit
PO Box 20247
Cranston, RI 02920-0943
Telephone (401) 462-8580

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: _____