

For office use only:				
Licensing Year:				
License No.:				
New I	Renewal <u>X</u>			

RENEWAL APPLICATION FOR SKILLED TRADES LICENSE

NAME	(First)	(Middle Initial)	(Last)	EMAIL ADDRESS	
HOME ADDRESS (include City, State & Zip Code)			PHONE NUMBER		
	G ADDRESS	(Street)	(City)	(State) (Zip)	
WAILIN	G ADDRESS	(Sileel)	(City)	(State) (Zip)	
		Skilled	Trades Type		
	Apprentice Plumbe		Apprentice Mobile Home	Apprentice Mechanical	
	Journeyman Plumber	Journeyman Electrician	Journeyman Mobile Home	Journeyman Mechanical	
	Master Plumber w/Gas	Master Electrician	n Master Mobile Home	Master Mechanical	
	Apprentice Solid-F	uel Appliance Journeym	an Sheet Metal Solid	d-Fuel Appliance Installer	
		CONTINUI	NG EDUCATION		
	Must obtain 18 hour	s of continuing education to	qualify for renewal.		
		•	ween January 1, 2020 – Dec	ember 31, 2022	
	•		was taken, number of hours		
	description of the co	•	, , , , , , , , , , , , , , , , , , , ,	,,	
	•		S MUST BE SUBMITTED W	ITH THE APPLICATION	
	0011200102111		·		
		FMPI OYMFI	NT INFORMATION		
Name	of Employer				
Ivallic	e or Employer		1 110116		
		ove and foregoing informations ssuance of this license.	n is true and correct and tha	t I have read and understand the	
PRINT	NAME	SIGNATURE		DATE	
		For Off	ice Use Only		
Test/C	Continuing Education Ve	rified By (copies attached):	Good	Through <u>12/31/</u>	
Applic	ation Approved/Denied I	oy	Date approved/denied		
Fee	: Apprentice- \$43.00	Journeym	an/Master/ or Solid Fuel Inst	aller- \$59.00	
Amo	ount \$ Receip	t No Date:	Received	Ву:	
				-	