

RETURN TO:

**BALTIMORE COUNTY PLUMBING BOARD
COUNTY OFFICE BUILDING
111 W. CHESAPEAKE AVENUE
TOWSON, MARYLAND 21204
MAIL STOP 1009**

PHONE: 410-887-3620

BOARD USE ONLY	
Received	_____
Fee	_____
Date Approved	_____
License Number	_____
Auditor Initials	_____

APPLICATION FOR JOURNEYMAN PLUMBER-GASFITTER RECIPROCAL LICENSE

1. License fee of \$105.00 must accompany the application.
2. Make payable to Baltimore County, Maryland
3. Use only post office express money order, bank draft or check.
4. **DO NOT SEND CASH.**

Application form must be filled in correctly. ALL QUESTIONS must be answered in FULL. ANSWERS MUST BE IN INK. There must be no variation in the name of the applicant in any part of the application.

REQUIREMENTS:

To be eligible to receive a reciprocal license as covered in this application, you must meet all of the requirements set forth by this Board. You must submit a "Letter of Good Standing" from the licensing agency you're reciprocating from. You must contact either the State of Maryland ,WSSC or Baltimore City to receive this letter. Have them mail a copy to you so that you may submit it and all other requirements with this form. This must be the original letter.

PLEASE NOTE:

- (A) You must submit a certificate from an approved gas school, including 2lb gas.
- (B) If you received your original plumbing/gasfitter license after October 1, 1993, you must submit a certificate from an approved backflow prevention course. This must be a current certificate.
- (C) If application is denied, the fee is not refundable.
- (D) All applications must be received 30 days prior to the day of exam.

Date: _____,20____

Please Print or Type

1. NAME: _____
Last Name First Name MI

2. PERMANENT ADDRESS: _____
Number & Street City & Zip Code

3. PHONE NUMBER: _____ DATE OF BIRTH: _____

4. How long have you lived at this address? _____ Years _____ Months.

5. Date of Examination for Journeyman License: _____

6. Check whether test was given by:

_____ State of Maryland
 _____ WSSC

7. If you took the WSSC exam, when did you reciprocate with the State of Maryland?
 _____ (approximate date).

If you took the State of Maryland exam, when did you reciprocate with the WSSC?
 _____ (approximate date).

8. Have you ever taken an examination for Journeyman/ Plumber Gasfitter in Baltimore County?
 _____ Yes _____ No

Date Exam Was Taken: _____

9. **EDUCATION**

COURSE	NAME & LOCATION OF SCHOOL	YEARS ATTENDED	DATE GRADUATED

10. PRACTICAL GASFITTING EXPERIENCE: List employers. Giving your present employer first.

NAME & ADDRESS OF PRESENT AND PAST EMPLOYERS	DATE STARTED	DATE TERMINATED

11. Submit with this application photocopies of:

1. Copy of current valid Driver's License showing photo.
2. Copy of Plumber Gasfitter License from WSSC or State of Maryland.
3. White renewal card filled out completely.
4. Copy of 2 lb Gas School Certification
5. Copy of B.F.P. School Certification

12. Submit this application with the original copy of the "Letter of Good Standing" from the licensing agency you are reciprocating from. **We will not accept a photocopy of this document.**

CERTIFICATE OF APPLICANT:

I hereby certify on this _____ day of _____ 20____ that the matters and facts set forth in the afore-going application are true to the best of my information, knowledge and belief and that the above named applicant meets all the requirements as stated on this application above, set forth by the board members of Baltimore County.

Signature of Applicant _____

STATE OF MARYLAND, BALTIMORE COUNTY, SS:

This certifies, that on the _____ day of _____ 20____ before the subscriber, a _____ of the State of Maryland , personally appeared the applicant named in the foregoing, and made oath in due form of law that the statements therein are true to the best of _____ knowledge and belief.

Witness my hand and official seal

Approved- Plumbing Inspections _____