VIRGIN ISLANDS PLUMBERS' & MECHANICAL LICENSING BOARD

Department of Licensing and Consumer Affairs
3000 Estate Golden Rock, Suite 9
St. Croix, VI 00820-4311
Telephone: 340.713.3522 (DLCA)
Facsimile: 340.773.6982

Attach 3
2x2 photos of
Applicant here

APPLICATION FOR EXAMINATION

Part I

In accordance with the provisions of 27 V.I.C. Ch. 7, which regulates Trades & Crafts in the U.S. Virgin Islands, I hereby apply for the following examination:

Plumbing Examination HVAC	**$300.00**
Mechanic Exam	**$200.00**
Non-Refundable Application Fee	**$50.00**

* Only the application fee will be accepted at the time application is submitted.

Part II

1. Full Name _____ _____ _____
   First Middle Last
2. Physical Address: _____
3. Mailing Address: _____
4. Business Address: _____
5. Business # ( ) _____ 6. Home # ( ) _____
7. Birth Date: _____ 8. Birth Place: _____
9. Citizenship: _____ 10. Naturalized: ( ) yes ( ) no
11. Social Security Number: _____ 11a. Email:_____
12. Virgin Islands Resident? ( ) yes ( ) no If yes, how long? _____
13. Present Business Activity: _____

14. In which state(s) do you currently hold registration/licensure: _____
_____
_____

15. Has your license ever been revoked? ( ) yes ( ) no

If yes, please explain: _____
_____
_____

16. Have you ever been censured for unprofessional conduct? ( ) yes ( ) no

If yes, please explain: _____
_____
_____

17. Have you ever been convicted of a felony? ( ) yes ( ) no

If yes, please explain: _____
_____
_____

Part III

18. **REFERENCES:** Please provide two (2) professional references from **licensed** plumbers or hvac mechanical contractor, respectfully, in the industry and one (1) character reference in the space provided below. Please note that the reference letters must correspond with the names listed below and should be persons other than Board Members and relatives of the applicant.

Name	Address	Telephone #
1.		
2.		
3.		

Part IV

19. EDUCATION/TECHNICAL TRAINING: (Please list in chronological order beginning with most recent)

Name & Address of Institution	Attendance From To	Technical Course	Graduation	Degree Received

20. EMPLOYMENT/EXPERIENCE: (Please list in chronological order your plumbing experience for the past 5 years. Use an additional sheet if necessary, following the same format or attach a resume.)

From To	Name, Address & Phone # of Employer	Name of Immediate Supervisor	Job Title and Description

*All information must be verifiable. Any false information may be reason for denial of application.

Part V

AFFIDAVIT
(Must be completed by all applicants)

State of _____

Territory of _____

Country of _____

I, _____, being duly sworn, depose and say that I am the person who executed the foregoing instrument; that I have read the same and know the contents thereof; that the matters stated therein are true to my knowledge; that I have not suppressed any information that might affect this application; and that I have read and understand this affidavit.

_____
Applicant's Signature

Sworn and Subscribed before me this _____ day of _____, 20 _____

_____
Notary Public

My Commission expires on _____

Do not write below this line:

BOARD DISPOSITION:

Application Approved: ( ) YES ( ) NO

_____ _____
Signature, Chairman of the Board **Date**

_____ _____
Member **Member**

_____ _____
Member **Member**

EXAM AND LICENSURE REQUIREMENTS

APPLICANT FOR EXAMINATION

1. Must be a resident of the Virgin Islands for at least 30 days immediately prior to submitting application for examination.
2. Must submit 2 letters of professional reference from persons with knowledge of applicant's work in the field specified and 1 letter of favorable character testimony.
3. Provide evidence of at least 5 years' experience in the specified trade.
4. Copy of current registration/licensure.
5. Copy of Certification from Trade School (if applicable).
6. Non-refundable Application Fee of $50.00.

* All applicants will be required to sit both a written and practical examination.

APPLICATION FOR LICENSURE

Upon successful completion of the examination, applicant must select the licensure he/she wishes to pursue.

An applicant for a Master Plumber or Master Mechanic (HVAV) License must provide to the Board the following:

1. Completed business license application approved by DPNR, VIFS & VIPD.
2. Certificate of Trade Name Registration (If applicable).
3. Letter from a financial institution stating the applicant is in good standing.
4. License fee of $130.00, which covers licensure for one (1) year from date of issuance
5. Non-refundable Application Fee of $50.00

* A holder of a Master Plumber's or Master Mechanic's License shall not employ more than one full or part-time apprentice or journeyman.

An applicant for a Plumbing Contractor or Air Conditioning/Refrigeration Contractor License must provide to the Board the following:

1. Completed business application approved by DPNR, FIRE & POLICE.
2. Employer Identification Number (EIN).
3. Certificate of Trade Name Registration (if applicable).
4. Letter from a financial institution stating the applicant is in good standing.
5. Proof of Public Liability Insurance.
6. Workman's Compensation Insurance (if applicable).
7. License fee of $130.00, which covers licensure for one (1) year from date of issuance.
8. Non-refundable Application Fee of $50.00

Notice: Title 27 V.I.C. § 275 "Whoever violates or refuses to comply with any provisions of this chapter or any rule or regulation thereunder shall be fined not more than $500.00 for each and every violation or act of non-compliance."