



Plumbers and Irrigators 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 ID (IE: Driver 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. 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.
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 journeyman's license. Plumber Journeyman's License must be valid for at least one (1) year prior to the master's test.

Plumber Journeyman 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 the Rhode Island Edition of the "BOCA International Plumbing Code 2006" and Rhode Island Edition of State Building Code SBC-3 State Plumbing code effective July 1, 2013.

Subject matter covered by the test includes Terminology and Calculations, Materials and Material Standards, Joints and Connections, Traps and Cleanouts, Plumbing Fixtures, Hangers and Supports, Indirect Waste Piping, Water Distribution Systems, Sanitary Drainage Systems, Vents and Venting Systems, Cross Connections, Storm Drains, Related Subjects and Inspecting and Testing.

7. 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 Journeyman exams. Certify an Apprentice Completion form can be obtained at: www.dlt.ri.gov/apprenticeship/forms/09CertifyCompletion.pdf
8. All out of State applicants must provide proof of current licensure from their respective state. Photo copy of trade license is not accepted as proof.
9. All Plumbers and Irrigation apprentices must submit a notarized letter on Company Letterhead with date of hire and job description.
10. All Plumbers and Irrigator apprentices must complete the ratio sheet by Master Plumber/Irrigator and must be signed.

Study Guide For Irrigation Licensing:

1. Understanding the effects of water pressure and flow rates and how it effects sprinkler design.
2. The principles of backflow preventers and back siphonage.
3. Refer to lawn irrigation company websites (Toro, Hunter, Rainbird) for design criteria.
4. Basic understanding of low voltage wiring, zone valves and control wiring.
5. Licensing requirements for irrigation installers.
6. Requirements for operating heavy equipment backhoes and trenching machines.

View your application status online at <https://dltweb.dlt.ri.gov/profregsonline>



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
Journeyman Plumber	051	\$ 75	\$ 72
Apprentice Plumber	052	No Test	No Fee
Master Irrigator	053	\$ 75	\$ 240
Journeyman Irrigator	054	\$ 75	\$ 72
Apprentice Irrigator	055	No Test	No Fee
Master water-filtration/treatment-system installer	056	\$75	\$240
Journeyman water-filtration/treatment-system installer	057	\$75	\$72

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

For the Apprentice Ratio Form please visit www.dlt.ri.gov/Profregs/pdfs/ApprenticeRatioSheet.pdf



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 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 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 están disponibles para asistir a clientes en idiomas, además del Español. Por favor contacte la División de Workforce Regulation, llamando al (401) 462-8580 o (401) 462-8570, para solicitar un intérprete o para traducción escrita en un idioma, además del Español.



Plumbers and Irrigators - Application for Examination and Apprentice

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? _____

CATEGORY – Applicants must state what license is requested

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: _____

1. Dates Worked: From: _____ To: _____

2. Name of Employer: _____ Type of Work: _____

2. Dates Worked: From: _____ To: _____

3. Name of Employer: _____ Type of Work: _____

3. Dates Worked: From: _____ To: _____

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

1. Location: _____ Degree/Diploma: _____

1. Dates Attended: From : _____ To: _____

2. Location: _____ Degree/Diploma: _____

2. Dates Attended: From : _____ To: _____

3. Location: _____ Degree/Diploma: _____

3. 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.

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
1511 Pontiac Avenue, PO Box 20247
Cranston, RI 02920-0943
Phone (401) 462-8580 | Fax (401) 462-8528

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

Equal Opportunity Employer • Auxiliary Aids and services are available upon request to individuals with disabilities. TTY via RI Relay: 711

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: _____