



# City of Beacon Building Department

Building Inspector – Lt. Timothy P. Dexter  
Deputy Building Inspector – David Buckley  
Deputy Building Inspector – Scott McHugh

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## Application for Examination For Certificate of Competency Plumbing

To the Building Inspector of the City of Beacon, One Municipal Plaza, Suite 1, Beacon, NY 12508

I hereby apply for examination for certificate of competency and, in compliance with provisions of the New York State Uniform Fire Prevention, Building Code and the Code of the City of Beacon.

1. My name is: \_\_\_\_\_
2. Date of Birth: \_\_\_\_\_
3. Place of Birth: \_\_\_\_\_
4. I am a Citizen of: \_\_\_\_\_
5. If naturalized give dates and place: \_\_\_\_\_
6. Home Address: \_\_\_\_\_
7. Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_
8. Business Name: \_\_\_\_\_
9. Business Address: \_\_\_\_\_
10. Present Occupation is: \_\_\_\_\_
11. List your occupation and the names and addresses of your employers during the past ten (10) years:

<u>Occupation</u>	<u>from mo. &amp; yr.</u>	<u>to mo.&amp; yr.</u>	<u>Employer &amp; Address</u>
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

12. I now hold or have held certificates of competency (plumbing) issued by the following municipalities (give date of issuance):

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13. Attached hereto and made part hereof is evidence in writing that I have had at least seven years experience as a journeyman plumber, such evidence consisting of letters, affidavits or other written papers or documents signed or verified by my employers and/or persons, firms or corporations for whom I have performed major plumbing work as a self-employer or independent contractor. (List names of all master plumbers, whose letters, affidavits or other written evidence are attached, by whom you have been employed as a journeyman plumber (not an apprentice) with dates of employment by month and year. If all or part of your five years journeyman experience has been as a self employer or independent contractor, list names and addresses of not less than five persons, firms or corporations, whose letters, affidavits or other written evidence are attached, for whom you have performed major plumbing journeyman services during each of the years of such self employment.)

<u>Master Employing Plumber</u>	<u>Year &amp; Month to</u>	<u>Year &amp; Month</u>
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<u>Name and Address of Person, Firm or Corporation for whom you performed plumbing work as a self-employer</u>	<u>Date of Work</u>	<u>Description of Work</u>
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14. Have you ever applied for a plumbing license in the City of Beacon prior to this date?

\_\_\_\_\_ If "yes" give dates: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

Sworn to before me this \_\_\_\_\_ day  
Of \_\_\_\_\_ 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public or Commissioner of Deeds