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Putnam County Consumer Affairs
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PUTNAM COUNTY PLUMBING/MECHANICAL TRADES BOARD

110 Old Route 6, Building #3, Carmel, New York 10512
Phone No. 845-808-1617 Ext. 46026 Fax No. 845-808-1930

JOURNEYMAN RENEWAL 2020-2022 **PLUMBING/MECHANICAL TRADES APPLICATION INSTRUCTIONS**

You must possess a current registration to legally work in Putnam County.

Use this checklist to complete the enclosed application and return it with the documents listed below. **Any application submitted without all of the requested information and documentation will be returned and considered invalid.**

A new Jpeg headshot must be emailed to ellen.sorrento@putnamcountyny.gov.

Checklist:

- CHILD SUPPORT OBLIGATIONS FORM** – (attached) This is a New York State requirement (this form must be completed whether there are child support issues or not).
- FILING FEE** in the form of a check or money order in the amount of **\$100.00** made payable to the *Commissioner of Finance*
- DRIVER'S LICENSE PLEASE NOTE:** License must be submitted with all applications. If the address on your driver's license is different from the home address on your application, you must **ALSO** submit proof of residency (utility bill, credit card statement, etc.).
- Updated Jpeg headshot must be emailed to ellen.sorrento@putnamcountyny.gov. If the photo we have on file is older than three (3) years, you must submit a new photo. Head and shoulder photo- no hats, no sunglasses.

Application must be postmarked by June 30, 2020. Late fees will apply to any application submitted after that date. **THERE IS NO GRACE PERIOD.**

① **Questions? Please call the number above or email our office at:**

ellen.sorrento@putnamcountyny.gov



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 Department of Consumer Affairs
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FOR OFFICE USE ONLY	
Registration No.	_____
Fee Amount:	_____ Photo <input type="checkbox"/> Y
	<input type="checkbox"/> Check #: _____
Child Support:	<input type="checkbox"/> Y Driver's License <input type="checkbox"/> Y
Master No.	_____
Notes:	_____

PLUMBING/MECHANICAL TRADES JOURNEYMAN RENEWAL APPLICATION 2020-2022

Answers to ALL questions must be printed or typed, accurate and complete in order to be submitted for certification.

Type of Plumbing/Mechanical Trade

Please check the trade in which you are seeking renewal

- Plumbing Sheet Metal LP Gas Installer Heating HVAC
 N.O.R.A Fire Sprinkler Refrigeration

Applicant and Business Information

*Name: _____ Journeyman Number: _____

*Company Name: _____

Home Phone: _____ * Work Phone: _____

*Cell Phone: _____ *Applicant E-mail: _____

*Home Address: _____

*Has your employer or demographic information changed since your last application? YES NO

*Have there been any criminal convictions against you since your last application? YES NO

If so, please give details and **provide a certified copy of the disposition:**

DATE:	COURT:	JUDGMENT CREDITOR:	DISPOSITION:
_____	_____	_____	_____

Affirmation

In consideration of being granted certification to conduct the business of plumbing or similar mechanical trade as a journeyman it is agreed that the applicant will only work under a Putnam County Licensed Master Tradesman and that he or she will comply with the rules and regulations of the Putnam County Department of Consumer Affairs.

PENALTY FOR FALSIFICATION: Any persons making any false statements as to qualifications and experience, or any person subscribing to or vouching for any misstatement shall be subject to those penalties as provided by New York State laws.

NOTE: THIS APPLICATION MUST BE NOTARIZED BELOW

_____ being duly sworn deposes and says that s/he is the applicant above named and that the statements contained herein are true to the best of his/her knowledge and belief.

 Applicant Signature

STATE OF _____)
 COUNTY OF _____) ss:

On the _____ day of _____ in the year _____ before me, the undersigned, personally appeared _____, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

 Notary Signature

*Required Field

Division of Safety and Health
License and Certificate Unit
Harriman State Office Campus
Building 12, Room 161A
Albany NY 12240
(518) 457-2735

WE ARE YOUR DOL



www.labor.ny.gov
license&certificate@labor.ny.gov

Appendix to a License/Certificate Application

The child support obligations
(New York State General Obligations Law Title 5 section 3-503)
do not apply to corporations.

Complete, sign and date this form if you are applying for a license/certificate or license/certificate renewal.

Applicant's Information

Last name: _____ First name: _____ Middle initial: _____

Social Security number: _____

The type of license/certificate requested: _____

Business: _____ Title: _____

Certification

Are you under an obligation to pay child support? If yes, complete items 1 - 4. Yes No

1. I am making payments in accordance with a plan agreed upon by the parties. Yes No

2. I am four months or more behind in the payment of child support. Yes No

3. My child support obligation is the subject of a pending court proceeding. Yes No

4. I am receiving public assistance or supplemental security income. Yes No

If you are four months or more behind in child support or have failed to comply with a summons, subpoena or warrant relating to a paternity or child support proceeding, you may be subject to suspension of your business, professional and/or driver licenses.

Affirmation

I acknowledge that giving false information is a crime and may result in this license/certificate being revoked.

Signature: _____ Date: _____