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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. 845-808-1928

JOURNEYMAN RENEWAL PLUMBING/MECHANICAL TRADES APPLICATION INSTRUCTIONS

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

Please do your best to 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.**

If necessary, updated Jpeg headshot emailed to plumbers@putnamcountyny.gov

Checklist:

- CHILD SUPPORT OBLIGATIONS FORM – attached
- 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. However, 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.)

Application must be postmarked by June 30, 2018. Late fees apply to any application submitted after that date.

① **Questions? Please call the number above or email our office at plumbers@putnamcountyny.gov**



COUNTY OF PUTNAM
 Department of Consumer Affairs
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FOR OFFICE USE ONLY	
License No.	_____
Fee Amount:	_____
<input type="checkbox"/> Check #:	_____
Receipt No.	_____ Child Support: <input type="checkbox"/> Y
Master No.	_____
Notes:	_____

PLUMBING/MECHANICAL TRADES JOURNEYMAN RENEWAL APPLICATION 2018-2020

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

- | | | | | |
|-----------------------------------|---|---|----------------------------------|-------------------------------|
| <input type="checkbox"/> Plumbing | <input type="checkbox"/> Sheet Metal | <input type="checkbox"/> LP Gas Installer | <input type="checkbox"/> Heating | <input type="checkbox"/> HVAC |
| <input type="checkbox"/> N.O.R.A | <input type="checkbox"/> Fire Sprinkler | <input type="checkbox"/> 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? 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 **MASTERS LICENSE** 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



New York State Department of Labor

Appendix to a License 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 or license renewal.

Applicant	
a. Name:	b. Social Security Number:
c. Title	d. The type of license requested:
e. Business Name (if applicable):	

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: _____