



Division of Professional Licensure
Office of Public Safety and Inspections
1000 Washington Street Suite 710, Boston, MA 02118

APPLICATION FOR SPRINKLER APPRENTICE LICENSE

Application must be filled out in ink and accompanied by a non-refundable \$40.00 processing fee
Processing fee must be in the form of a check or money order made out to the "Commonwealth of Massachusetts"

Check the box if you are requesting examination accommodations due to a disability that substantially limits your ability to perform a major life activity. You must submit an Accommodations Request Form along with the required documentation as part of this application in order for this request to be considered.

Full Name: _____ (Print Legibly) Social Security No.: _____ (Required)

Home Address: _____ (Street) _____ (City) _____ (State) _____ (Zip Code)

Mailing Address: _____ (Street) _____ (City) _____ (State) _____ (Zip Code)

Date of Birth: _____ Email Address: _____ Telephone No.: _____

Name of Employer: _____ Employer's Telephone No.: _____

Employer's Address: _____ (Street) _____ (City) _____ (State) _____ (Zip Code)

Employment Title: _____

Did you authorize us to use your RMV photo or enclose a 2" by 2" photo? <i>(Required)</i>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Are you employed by a Licensed Massachusetts Sprinkler Contractor? <i>(Required - Must include a letter from your employer including License Number)</i>	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Did you include your \$40.00 processing fee? <i>(Non-Refundable)</i>	<input type="checkbox"/> YES	<input type="checkbox"/> NO

AUTHORIZATION FOR RELEASE OF RMV PHOTO INFORMATION
(MASSACHUSETTS RESIDENTS ONLY)

My signature below authorizes the Office of Public Safety and Inspections to electronically access my photograph from the Massachusetts Registry of Motor Vehicles database solely for use on this license/registration.

MA- RMV Photo Release Signature

Under the penalties of perjury I certify that to the best of my knowledge and belief the information in this application is true, I have paid all State Taxes, and I have paid any and all outstanding civil fines owed to the Office of Public Safety and Inspections which are required under Law.

 Signature of Applicant

 Date

PREREQUISITES:

ALL of the following items **MUST BE SUBMITTED WITH THE APPLICATION** in order for your application to be processed properly. Failure to submit all required information and proper fee will result in ineligibility to take the exam and forfeiture / loss of processing fee.

APPRENTICE SPRINKLERFITTER PREREQUISITES

- A completed application with proper mailing address and social security number.
- Attach a 2" x 2" Passport size photo (Unless Authorization for Release of RMV Photo Information Signed-Off)
- Non-refundable application processing fee **(\$40.00)** in the form of a check or money order made out to the **"Commonwealth of Massachusetts"**.
- Documentation that you are employed by a Massachusetts Sprinkler Contractor.

PLEASE MAIL ALL COMPLETED APPLICATIONS, ALONG WITH THE NON-REFUNDABLE APPLICATION PROCESSING FEE, TO THE ADDRESS BELOW:

**Division of Professional Licensure
Office of Public Safety and Inspections
1000 Washington Street Suite 710
Boston, MA 02118
ATTN: CASHIERS OFFICE**

* INCOMPLETE APPLICATIONS WILL NOT BE SCHEDULED FOR EXAMINATION UNTIL ALL MISSING DOCUMENTATION IS SUBMITTED.