



# Division of Occupational Licensure

## Office of Public Safety and Inspections

1 Federal Street, Suite 0600

Boston, MA 02110-2012

### APPLICATION FOR REFRIGERATION TECHNICIANS LICENSE

**Application must be filled out in ink and accompanied by a non-refundable \$75.00 processing fee**  
**Processing fee must be in the form of a check or money order made out to the "Commonwealth of Massachusetts"**

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***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.: \_\_\_\_\_

❖ Massachusetts Refrigeration Apprentice License ***(unless the below is checked):*** \_\_\_\_\_  
***(Required – RA License No.)***

☐

***I certify that I do not have a Massachusetts Refrigeration Apprentice License because all of my work experience was obtained solely outside of Massachusetts.***

Name of Employer: \_\_\_\_\_ Employer's Telephone No.: \_\_\_\_\_

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

Refrigeration Contractor's (RC) Name: \_\_\_\_\_ RC License No.: \_\_\_\_\_  
***(Required)***

• Have you ever examined for any of the Massachusetts Refrigeration Technician licenses? ☐ YES ☐ NO

• Do you now, or have you held any of the Massachusetts Refrigeration Technician licenses? ☐ YES ☐ NO

If **YES**, list the license number: \_\_\_\_\_  
(License Number) (Expiration)

• Has any disciplinary action been taken or is pending against you by a licensing/certification board located in the United States or any country or foreign jurisdiction? ☐ YES ☐ NO

***(If YES, please state the details on a separate sheet and attach it to your application.)***

#### 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

Did you authorize OPSI to use your RMV photo or enclose a 2" by 2" photo? <i>(Required)</i>	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Did you include a copy of your <u>Universal CFC Certification</u> <i>(Required)</i>	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Did you include a letter from your employer documenting your work hours? <i>(Required)</i>	<input type="checkbox"/> YES	<input type="checkbox"/> NO	* <input type="checkbox"/> I have met all of the certificate requirements in another jurisdiction.
Did you include a letter from an OPSI approved school documenting your completed training hours? <i>(Required)</i>	<input type="checkbox"/> YES	<input type="checkbox"/> NO	* <input type="checkbox"/> I have met all of the certificate requirements in another jurisdiction.
Did you include a copy of your High School Diploma or GED? <i>(Required)</i>	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Did you include your <b>\$75.00</b> processing fee? <i>(Non-Refundable Check or Money Order)</i>	<input type="checkbox"/> YES	<input type="checkbox"/> NO	

\*If an applicant has documentation that requirements have been met in another jurisdiction that are the equivalent of the Massachusetts requirements for completion of apprenticeship – Submit all documentation with this application. After review, your application **MAY** be forwarded to the Bureau of Pipefitters, Refrigeration Technicians and Sprinkler Fitters who may allow the candidate to sit for examination.

*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:

### REFRIGERATION TECHNICIANS PREREQUISITES

- Must satisfy **one (1)** of the following three scenarios to take the Massachusetts Refrigeration Technicians Exam:
  - Documentation from employer that you have worked not less than **6,000 Hours** in Massachusetts as a Refrigeration Apprentice along with Documentation from an OPSI approved school that you have completed **250 Hours** in a refrigeration course, which must consist of **100 Hours** of Refrigeration Theory and **150 Hours** of Massachusetts Electrical Code training.
  - Documentation from employer that you have worked not less than **4,000 Hours** in Massachusetts as a Refrigeration Apprentice along with Documentation from an OPSI approved school that you have completed **500 Hours** in a refrigeration course, which must consist of **250 Hours** of Shop Related Work, **100 Hours** of Refrigeration Theory and **100 Hours** of Massachusetts Electrical Code training.
  - Documentation from employer that you have worked not less than **2,000 Hours** in Massachusetts as a Refrigeration Apprentice along with Documentation from an OPSI approved school that you have completed **1,000 Hours** in a refrigeration course, which must consist of **700 Hours** of Shop Related Work, **100 Hours** of Refrigeration Theory and **100 Hours** of Massachusetts Electrical Code training.

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

**OFFICE OF PUBLIC SAFETY AND INSPECTIONS  
1 FEDERAL STREET, SUITE 0600  
BOSTON, MA 02110-2012  
ATTN: LICENSING DIVISION**

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