

Commonwealth of Massachusetts DIVISION OF OCCUPATIONAL LICENSURE Board of Examiners of Sheet Metal Workers 1 Federal Street, Suite 0600, Boston, Massachusetts 02110-2012

STATEMENT OF THE EMPLOYING MASTER SHEET METAL WORKER:

I(Please Print Name of	of Employing Master Sheet	Metal Worker)	(License Number)
Operating a Sheet Metal Comp	oany under the busine	ess firm name of	
Located at:			
(Address)	(City/Town)	(State)	(Zip Code)
Telephone Number:		do hereby make appli	cation to register
(Please P	rint Name of Apprentice Appli	cant) a	s an apprentice sheet
metal worker. I herby certify th			will work under the
direct supervision of a journeyman sheet metal worker in my employ in accordance with the			
provisions of 271 CMR 5.02 (2). I have verified that all of my employees possess a current			
license in good standing with the Board of Examiners. I herby certify that the previous			
statements are true and are made under the pains and penalties of perjury.			
Signature of Employing Master Sheet Metal Worker:			