



**COUNTY OF ROCKLAND
BOARD OF PLUMBING, HEATING AIR CONDITIONING,
SHEET METAL & REFRIGERATION EXAMINERS**

The Sain Building –6th Floor
18 New Hempstead Road
New City, NY 10956
(845) 708-7606 Fax (845) 708-7616

C. SCOTT VANDERHOEF
County Executive

TERRY D. GROSSELFINGER
Director

**INSTRUCTIONS FOR COMPLETING
PLUMBING, HEATING AIR CONDITIONING, REFRIGERATION,
AND SHEET METAL LICENSE APPLICATION.**

1. Fill out candidate profile completely, incomplete applications will not be considered.
2. Enclose a check made payable to R. C. BOARD OF P.H.C. EXAMINERS in the amount of \$375.00 (Non-refundable application fee). Examination fees will be collected at a later date, after Board approval, and are also non- refundable.
3. Enclose two (2) recent one inch by one inch photos.
4. Enclose copy of state driver's license or state photo I.D.
5. Submit approved documentation supporting all your work experience. Certified Social Security record (Request form SSA-7050-F4), OR your Social Security read-out of your detailed FICA earnings and employer names for the years you request.. The 7 year time requirement for any combination of license shall be within ten (10) years of the date of application for license.
6. Submit graduation certificate from U.S. Department of Labor approved trade school if you are claiming vocational training as part of your requisite trade experience.
7. Complete affidavit form and notarize. (Out of State Notary's must submit their Authenticating Certificate)
8. Indicate on Schedule "A", the type of license or combination thereof you are applying for.
9. Complete Schedule "B", if you will be using your license to represent a company or corporation.
10. Complete Schedule "C", background statement.
11. For Cooling/ Refrigeration license; submit a copy of your EPA Refrigerant Handling Certificate.
12. Include two reference letters on letterhead from past employers, engineers, or architects. No personal references will be considered.
13. Submit Alien/Green card if necessary.
14. New York State Law requires that you fill out a CHILD SUPPORT CERTIFICATE. This form must be notarized and returned to us for approval by the DSS.

YOU MUST FILL OUT ALL PAPERWORK AND SUBMIT ALL DOCUMENTS REQUESTED



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**PLUMBING, HEATING, AIR CONDITIONING, REFRIGERATION, AND SHEET METAL
LICENSE APPLICATION.**

CANDIDATE PROFILE

PERSONAL INFORMATION:

Applicant Name _____ App Date: _____
Home Address _____ Soc. Sec. # _____
Town/City _____ State _____ Zip _____ Home Phone _____

EDUCATIONAL BACKGROUND:

School	Dates Attended	Graduation Date
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_____	_____	_____
_____	_____	_____
_____	_____	_____

TRADE RELATED APPRENTICE WORK EXPERIENCE:

1. Company Name _____ Supv. _____
Address _____ Co. Phone # _____
Dates of Employment _____ Job Title _____
Apprentice or Journeyman _____

2. Company Name _____ Supv. _____
Address _____ Co. Phone # _____
Dates of Employment _____ Job Title _____
Apprentice or Journeyman _____



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TRADE RELATED JOURNEYMAN EXPERIENCE:

1. Company Name _____ Supv. _____
Address _____ Co. Phone # _____
Dates of Employment _____ Job Title _____
Apprentice or Journeyman _____

2. Company Name _____ Supv. _____
Address _____ Co. Phone # _____
Dates of Employment _____ Job Title _____
Apprentice or Journeyman _____

AFFIDAVIT

**STATE OF NEW YORK
COUNTY OF ROCKLAND**

_____ being duly sworn, deposes and
says that he, or she, is the applicant named herein and that the statements
contained herein are true to the best of his knowledge and belief.

Signature of Applicant

**SWORN TO BEFORE ME THIS
_____ DAY OF _____**

NOTARY PUBLIC



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SCHEDULE A - INDICATE THE TYPE OF LICENSE(S) YOU ARE APPLYING FOR:

PLUMBING

HEATING

AIR CONDITIONING

REFRIGERATION

SHEET METAL

CIRCLE ONLY THE TYPE FOR WHICH YOU ARE APPLYING AT THIS TIME.

YOU MAY USE THIS APPLICATION TO APPLY FOR ONE OR ANY COMBINATION OF THE LICENSES REQUIRED IN THE COUNTY OF ROCKLAND. HOWEVER, IF AT A LATER DATE YOU WISH TO APPLY FOR ADDITIONAL LICENSE TYPES, A SEPARATE APPLICATION WITH FEE WILL BE REQUIRED.



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SCHEDULE B - FOR USE OF COMPANY OR CORPORATE NAME

APPLICANT NAME _____

COMPANY OR CORPORATION _____

NATURE OF BUSINESS _____

**YOU MUST INCLUDE WITH THIS FORM A COPY OF YOUR ROCKLAND COUNTY
BUSINESS CERTIFICATE FOR SOLE PROPRIETORS OR PARTNERSHIPS IN A
BUSINESS. FOR CORPORATIONS, YOU MUST SUBMIT A COPY OF YOUR FILING
RECEIPT FROM THE SECRETARY OF STATE OF NEW YORK**



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NAME _____

ADDRESS _____

SCHEDULE C - CIVIL & CRIMINAL BACKGROUND STATEMENT
INDICATE ON THIS FORM ANY FELONY OR MISDEMEANOR CONVICTIONS
YOU HAVE. IF NONE, INDICATE NONE.

DATE	COURT	OFFENSE	DISPOSITION
_____	_____	_____	_____
_____	_____	_____	_____

INDICATE BELOW, ANY UNSATISFIED JUDGEMENTS AGAINST YOU

DATE	COURT	JUDGEMENT
_____	_____	_____
_____	_____	_____

SIGNATURE _____

DATE _____

SWORN TO BEFORE ME THIS
_____ **DAY OF** _____

NOTARY PUBLIC



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EXAM SCHEDULE FOR 2012

**ALL EXAMINATIONS WILL BE TAKEN AT THE FIRE TRAINING
CENTER IN POMONA, NEW YORK**

PLUMBING TEST - TUESDAY, MARCH 20
HEATING, AIR CONDITIONING, SHEET METAL
& REFRIGERATION – THURSDAY, MARCH 22
LAST FILING DATE – FEBRUARY 10, 2012

PLUMBING TEST - TUESDAY, JUNE 26
HEATING, AIR CONDITIONING, SHEET METAL &
REFRIGERATION – THURSDAY, JUNE 28
LAST FILING DATE – MAY 11, 2012

PLUMBING TEST - TUESDAY, OCTOBER 23
HEATING, AIR CONDITIONING, SHEET METAL &
REFRIGERATION – THURSDAY, OCTOBER 25
LAST FILING DATE – SEPTEMBER 7, 2012

PLUMBING TEST - TUESDAY, DECEMBER 11
HEATING, AIR CONDITIONING, SHEET METAL &
REFRIGERATION – THURSDAY, DECEMBER 13
LAST FILING DATE – NOVEMBER 9, 2012



COUNTY OF ROCKLAND
DEPARTMENT OF WEIGHTS AND MEASURES
OFFICE OF CONSUMER PROTECTION

18 New Hempstead Road, 6th Floor
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(845) 708-7616 FAX

C. SCOTT VANDERHOEF
County Executive

TERRY D. GROSSELFINGER
Director

TO: Licensees & Applicants
FROM: Terry D. Grosselfinger, Esq.
Director
RE: Child Support Certification

New York State law (General Obligation Law, Section 3-503) **REQUIRES** this office to gather information to allow the Department of Social Services to determine if applicants for a license issued by this office and those seeking to renew their license are in default of their obligation to pay child support.

Therefore, you must fill out the attached form completely and sign same before a notary. The information you supply will be checked by the Department of Social Services against a nationwide database to confirm that you are not in default on child support obligations.

PLEASE TAKE NOTICE that providing false information may result in criminal charges and, in addition, may result in the denial of your application or renewal of your license.

PLEASE TAKE FURTHER NOTICE that any persons who are four months or more in arrears in child support or who have failed to comply with a summons, subpoena or warrant relating to a paternity or child support proceeding may be subject to suspension of their business, professional, drivers and/or recreational licenses and permits including, but not limited to, licenses issued pursuant to section 11-0713 of the environmental conservation law.

I thank you for your cooperation in this matter.

TDG/jw
Attach.

