## SOUTH DAKOTA DEPARTMENT OF LABOR AND REGULATION

## SOUTH DAKOTA PLUMBING COMMISSION

217 W. Missouri Ave., Pierre, SD 57501

Tel. 605.773.3429 Fax: 605.773.5405 dlr.sd.gov/plumbing

# **APPRENTICE LICENSE APPLICATION**

## INSTRUCTIONS

This application must be filled out electronically or legibly printed in ink. Failure to answer all questions and submit a complete application will result in a delay in processing. An incomplete application will expire after 30 days from the date of receipt. If your application expires, you will need to reapply and resubmit fees. The license fee is \$**10** for each license type. The license fee is non-refundable.

Apprentice License Type	:				
	Apprentice Plumber Appl. Inst. Apprentice W/C Inst. Apprentice	Sewer & Water Installation Apprentice Mobile Home Apprentice Underground Irrigation Apprentice			
I would like to purchase a:	2015 UPC Codebook\$140	2015 UPC Study Guide\$7	5 Utility	 Contractor Handbook\$50	
Applicant Personal Inform	mation				
First Name:	M.I.	Last Name:			
Social Security Number:		_ Date of Birth:		Age:	
Address:		City:	State:	Zip:	
Phone:	_	Cell Phone:			
Email Address:					
Employer Information					
Present Employer:		W	/ork Phone	2:	
Employed as:			_ Start Dat	e:	
Employer Address:		City:	State:	Zip:	
Employer Email Address:					
Professional License Hist	ory				
Have you ever carried a Plu	mbing or Specialty License?	Yes No If yes, wher	e?		
State the type or grade of L	icense:	Valid from:		to:	
Was the License obtained b	y examination? Yes	No			
Have you ever had a Plumb	ing or Specialty License revo	ked? Yes No By	whom?		
If yes, give reasons:					

Have you previously made application for a State of South Dakota Plumbing or Specialty license?	Yes	No
Have you previously been examined for a Plumbing or Specialty license by this commission?	Yes	No

If yes, state type, and results of examination:

Is۱	your spouse ar	active-duty	v member	of the armed	forces?	Yes	No
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If yes, is your spouse subject to military transfer to South Dakota, and did you leave employment to accompany your spouse to South Dakota?

Have you ever been convicted of, or pled guilty or nolo contendre to a crime of violence as defined under §22-1-2? Yes No

(If yes, please provide a copy of the criminal complaint or indictment, sentencing order, and any evidence of rehabilitation.)

Acknowledgement: I declare and affirm under the penalties of perjury that this claim (petition, application, information) has been examined by me, and to the best of my knowledge and belief, is in all things true and correct. If granted a license, I promise to abide by all the laws and rules of the State of South Dakota governing these practices.

The disclosure of the applicant's Social Security number on the front page of this application form is mandatory pursuant to 42 USCA 666, Title IV-D of the Social Security Act. The Plumbing Commission will keep the applicant's Social Security number confidential, except that the number may be provided to the Department of Social Services for use in administering Title IV-D of the Social Security Act.

### Payment Methods (fees are non-refundable):

- \$10 check or money order payable to the South Dakota Plumbing Commission. Be sure to include the amount for any books being requested.
- To pay by credit card, please call the office at 605.773.3429. For your security, we **do not accept** credit card payments via email.

### **Application Submission:**

- 1. Print and sign application.
- 2. MAIL to: 217 W Missouri, Pierre, SD 57501 or Fax to: 605.773.5405

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

SPACE RESERVED FOR COMMISSION					
Date Reviewed:	Reviewed by:				
Denied:	_ Reason for denial:				
Approved:	License Number Issued:				