Journeyman & Master Plumber Certification Application

Please check one:  □ Journeyman Exam  □ Master Exam
Location:  □ Las Vegas  □ Reno
UPC Code:  2018 UPC

Applicant Information: (Please print or type)

Name of Applicant:  ____________________________  Test Date Requested:  ____________________________
Address:  ________________________________________________________________
City:  ____________________________  State:  ____________  Zip Code:  ____________________________
Daytime Telephone #:  ____________________________  Evening Telephone #:  ____________________________
Last 6 digits of Social Security number:  XXX-____-____  Email Address:  ____________________________

☐ I would like to receive notifications via text.  ☐ I would like to receive notifications via email.

Test Choice: Choose ONE:

☐ Computer Lab Test

Email Address:  ____________________________  (Required for Computer Testing)

For Individuals requesting to take an examination at a PSI center there will be an additional eighty dollar ($80.00) processing fee. Exams given at PSI centers require that an email address be provided. You will receive an e-mail confirmation with your login information to schedule the exam date and time. Send $205.00 fee with this application for Computer Lab exams to NITC. For any examination scheduled at a PSI center, cancellation and rescheduling must be made at least 48 hours prior to the assigned date and time or a rescheduling fee of $80.00 will be assessed. Submit application via email: nbopecerts@nationalltc.com, fax: (213)351-7632 or mail: NITC, 501 Shatto Place, Suite #201, Los Angeles, CA 90020.

OR

☐ Paper Exam (min/group 8) $125.00 fee **must** be accompanied with application.

Test Date Requested:  ____________________________ (See Candidate Bulletin for available dates only).

Have you taken this exam on a previous date?  ☐ Yes  ☐ No  If yes, Date:  ____________________________

Method of Payment

(**Required Fields for credit card payments**)  

*Total Amount Enclosed:  $  ____________  Check  ☐  Money Order  ☐  Visa  ☐  Master Card  ☐  AMEX  ☐
*Credit Card No:  ____________  *Expiration Date:  ____________________________
CVV2:  ____________  Last three or four digits on back of Visa and Master Card, Amex CVV2 on front of card.

*Credit Card “Billing Address“:  ____________________________  *Credit Card “Billing Address“ Zip Code:  ____________
*Name on Card:  ____________________________  *Signature:  ____________________________

As it appears on card (Please Print)  Signature:  Signature as shown on credit card
AFFIDAVIT OF EXPERIENCE

Journeyman: Minimum four (4) years in a state registered, accredited apprenticeship or 8,000 hours of substantiated experience in the plumbing trade.

Master: One (1) year or 2,000 hours holding a current Nevada Journeyman License in good standing.

This form is intended to be used for compiling verifiable hours in order to take the Journeyman or Master Plumber Certification Exam. All journeyman applicants shall provide proof of employment in the plumbing industry. Each Journeyman applicant shall have a minimum of four (4) years in a state registered, accredited apprenticeship or 8,000 hours of substantiated experience in the plumbing trade. All master plumber applicants shall have proof of holding a current and in good standing NBOPE Nevada Journeyman Plumber License for a period of 1 year or 2,000 hours.

The following verification must be completed by a plumbing contractor. Alternate methods of employment verification include the following: letters of employment verification from plumbing contractors on their company letterhead only, and copies of past W-2s.

I, ___________________________ Affirm and certify that ___________________________
Contractor/Plumber Applicant

has been employed by, __________________________________________
Company Name

from _____/_______/_______ to _____/_______/_______
mn/dd/yy mn/dd/yy

Print Name ___________________________ Signature ___________________________

Date: ___________________________

NOTE: Journeyman and Master Licenses can be revoked if any fraudulent information is given on the Affidavit of Experience.

Subscribed and sworn before me on the (date): ___________________________
Notary Public in and for the state of: ___________________________
Residing in (county): ___________________________
My commission expires on: ___________________________
Notary Signature: ___________________________