

# MASTER PLUMBERS LICENSE FACT SHEET

---

## I. REQUIREMENTS FOR SUBMITTING AN APPLICATION:

1. Completed Application for License.
2. FELLOW PLUMBER OR EMPLOYER'S AFFIDAVIT FOR PLUMBERS LICENSE must be filled out by a certified licensed plumber (Preferably from the Town of Babylon.)
3. If your business is a corporation or partnership, submit a notarized letter stating what percentage of the company you own.
4. W-2 forms showing seven (7) years experience. **(UNLESS APPLYING FOR RECIPROCAL LICENSE)**
5. Two (2) pictures 1 ½" by 1 ½" (No glasses).
6. \$200.00 cashier's check or money order made payable to the Town of Babylon.
7. Two (2) proofs of residency (tax bill, utility bill, bank statement) (no driver's licenses).
8. Two (2) proofs of business address (tax bill, utility bill, bank statement, bill/voucher from plumbing Supply Company).
9. Three (3) personal character reference letters. Letters need to include full name and address, telephone number, e-mail address, and signature must be notarized.
10. If you are applying for a Reciprocal License you must also provide:
  - a. Certificate of Competency from the town in which you reside or have your business.
  - b. A current Letter of Good Standing from the town in which you reside or have your business. (Dated within one month)

You may also submit at this time, any programs, certificates, schooling, etc. that you feel would be helpful to the Plumbing Board when considering your application.

When the application is completed, submit by mail or in person to the Town of Babylon at 200 East Sunrise Highway, Lindenhurst, NY 11757 to the attention of the Town Clerk's Department.

## II. PLUMBERS EXAMING BOARD – REVIEW AND TESTING:

After your completed application is submitted, you will be scheduled to meet with the Plumbers Examining Board where you will be interviewed and your application will be reviewed. You will be scheduled for written and practical tests. If you are requesting a license under reciprocal agreements and the Board approves, no testing will be required.

## III. ADDITIONAL DOCUMENTS REQUIRED:

When you have passed all tests or have been approved for reciprocity, you will be required to provide:

1. Certificate of Liability Insurance coverage: Certificate must include your own name, the business name and Town of Babylon listed as Additional Insured. **Must be on an Acard-25 form.**
2. Workmen's Compensation Coverage. **Must be on either a NYS Fund Form U-26.3 or a C-105.2.** Waiver from Workmen's Compensation. **Must be on a CE-200 form.**
3. A fee of \$150.00 \$200.00 or \$250.00 is payable via Certified Check, Cashier's Check or Money Order. Please contact the Town Clerks office at 631-957-4291 for fee applicable for you.

**If you have any questions, please call Stephen at 631- 957-4291**



# FELLOW PLUMBER OR EMPLOYER'S AFFIDAVIT FOR PLUMBERS LICENSE

(PLEASE PRINT OR TYPE)

1. I have known the applicant \_\_\_\_\_, for \_\_\_\_\_ years. I have employed the applicant from \_\_\_\_\_ to \_\_\_\_\_ as a  
 Master Plumber       Journeyman Plumber.

2. During this time, his/her responsibility included:

\_\_\_\_\_

3. His/Her work was  Excellent  Satisfactory  Poor  
Comments:

4. I have read the statements made in his/her application and believe them to be true. I endorse his/her application for a (check one):

MASTER PLUMBER LICENSE       RESTRICTED LICENSE  
FOR \_\_\_\_\_

=====

5. Employer Information

Your Name: \_\_\_\_\_  
Business Name: \_\_\_\_\_  
Address: \_\_\_\_\_

6. PLUMBERS LICENSE # \_\_\_\_\_ TOWN \_\_\_\_\_

=====

7. I understand this application is to be filed with the Town Clerk and that this information will be relied upon by the Town of Babylon in the granting of this license.

SIGNATURE: \_\_\_\_\_

Sworn to before me on the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

NOTARY: