

APPLICATION FOR PLUMBER CLASS _____ DESIGNATION _____

I, Name _____

Address _____

do herewith make application to the Board of Plumbing Examiners of Clay Center, Kansas, for registration as a Plumber Class. NEW _____ RENEWAL _____

Experience: (Give names of companies worked for, location worked, dates and type of work, if new.)

I offer the following references (Character and Ability, if new.)

Name _____ Address _____

Name _____ Address _____

Name _____ Address _____

I am familiar with the ordinances of Clay Center, Kansas, and will abide by them if registered. I authorize the Board of Plumbing Examiners to contact the companies listed above as employers to establish the accuracy of the statements and the references given.

Dated this _____ day of _____ Signed _____

Clay Center, Kansas.