

BERN TOWNSHIP
1069 Old Bernville Road
Reading PA 19606

**APPLICATION FOR
PLUMBER LICENSE**

Plumber's Name: _____

Address: _____

Home Phone: _____

Business Name: _____

Address: _____

Business Phone: _____

Which license are you applying for? (check one) Journeyman _____ (\$30.00)
Master _____ (\$50.00)

With whom did you learn plumbing? _____

Were you apprenticed as a plumber? _____

How many years apprenticeship did you serve? _____

Are you familiar with the 2003 International Plumbing Code/2003 IRC used in the Bern Township? _____

Have you been continuously employed at plumbing? _____

If not, how long have you been otherwise employed? _____

Have you ever taken an examination in plumbing? _____

If so, when _____ If so, where _____

(Please attach documentation of any examinations and copies of licenses issued in other municipalities)

Please provide the names and addresses of three references who are Master Plumbers and who have known you for at least two (2) years.

Name: _____

Address: _____

Phone: _____

Name: _____

Address: _____

Phone: _____

Name: _____

Address: _____

Phone: _____

Applicant's Signature _____ **Date** _____

Print Name _____

NOTE An original Certificate of Insurance must accompany this application along with the required fee. The certificate holder listed on the certificate must be listed as the Bern Township at the address above.