

Putnam County Consumer Affairs  
Phone: (845) 808-1617  
Fax: (845) 808-1928  
plumbers@putnamcountyny.gov



**PUTNAM COUNTY  
PLUMBING/MECHANICAL TRADES BOARD  
110 OLD ROUTE SIX, BUILDING #3, CARMEL, NY 10512**

**PLUMBING/MECHANICAL TRADES MASTER LICENSE  
APPLICATION INSTRUCTIONS**

**STEP ONE**

There are three steps to become a licensed plumbing or mechanical trades master in Putnam County.

First, the Plumbing Board must review your application. **Please complete the enclosed application form and supply detailed proof of your experience.** Detailed experience must include names, addresses and a description of responsibilities at said jobs. **The application fee is \$150.00. Applications are only considered during Board meetings and must be submitted seven business days prior to any monthly meeting.**

Next, upon the Plumbing/Mechanical Trades Board’s approval of your application, you will be required to take a Master License Test in your area of expertise. Tests are administered monthly by an outside testing agency, Brewster Technology. There is a separate testing fee payable directly to the testing agency.

Finally, upon passing the test, we will provide you with a New Plumbing/Mechanical Trades Application form for completion. **The annual fee is \$500.00.**

Please do your best to use this checklist to complete the first step in the application process. **Any application submitted without all of the requested information and documentation will be returned and considered invalid.**

**PROOF OF EMPLOYMENT:** Examples include, but are not limited to: W-2 tax forms, notarized statements of hours worked from employers, union or benefit funds, notarized examples of jobs performed on company letterhead, inspection certificates, etc.

- EPA II, III or Universal if applying for an HVAC or Refrigeration License.
- Water Well/Pump and Well Drilling must be registered with the NYS DEC and must provide proof. If drilling Geothermal, one test from DEC must include a Geothermal test result.
- LP Gas must provide proof of Completion of CETP
- Fire Sprinkler Installation-NICET III/Inspection-NICET II - AS OF JANUARY 2024

**DRIVER’S LICENSE OR STATE ISSUED IDENTIFICATION**

**APPLICATION FEE IS \$150.00 PAYABLE TO THE COMMISSIONER OF FINANCE**

**EXPERIENCE REQUIRED: PLUMBING 9 YRS., HEATING & HVAC-R 7 YRS., LP GAS 5 YRS., NORA SILVER, WELL, PUMP, WATER TREATMENT 2 YRS., FIRE INSTALLER/INSPECTOR 5 YRS.**

**PROVIDE W-2’S AS PROOF OF EXPERIENCE**

**NICET CERTIFICATION FOR FIRE SPRINKLER INSTALLER/INSPECTOR**



**COUNTY OF PUTNAM**  
 Office of Consumer Affairs  
 110 Old Route 6 Bldg. 3  
 Carmel, NY 10512  
 Phone: (845) 808-1617 Ext. 46026  
 Fax: (845) 808-1928  
[plumbers@putnamcountyny.gov](mailto:plumbers@putnamcountyny.gov)

FOR OFFICE USE ONLY	
License Application date:	_____
Fee Amount: _____	<input type="checkbox"/> Check #: _____
Credit/debit card:	_____
M.O. #:	_____
Account #:	_____
Notes:	_____

**PLUMBING/MECHANICAL TRADES STEP ONE MASTER LICENSE APPLICATION**

**PLEASE TYPE OR PRINT CLEARLY**  
**INCOMPLETE OR UNREADABLE APPLICATIONS WILL BE RETURNED**

Please check  the trade in which you are seeking certification.

- |  |  |   |  |                               |
|--|--|---|--|-------------------------------|
| <input type="checkbox"/> Plumbing                  | <input type="checkbox"/> Sheet Metal               | <input type="checkbox"/> LP Gas Installer | <input type="checkbox"/> Heating             | <input type="checkbox"/> HVAC |
| <input type="checkbox"/> Oil burner/N.O.R.A.       | <input type="checkbox"/> Water Treatment           | <input type="checkbox"/> Pump Installer   | <input type="checkbox"/> Water Well Drilling |                               |
| <input type="checkbox"/> Fire Sprinklers Installer | <input type="checkbox"/> Fire Sprinklers Inspector | <input type="checkbox"/> Refrigeration    | <input type="checkbox"/> Geothermal Drilling |                               |

**Reciprocation License** – Include copy of license certificate.

County: \_\_\_\_\_ License No.: \_\_\_\_\_

**Applicant Information**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

\_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-mail (required): \_\_\_\_\_

**Present Employment Information**

Name of Business: \_\_\_\_\_ Name of Present Employer: \_\_\_\_\_

Business Address: \_\_\_\_\_ Business Phone: \_\_\_\_\_

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

E-mail (required): \_\_\_\_\_

**Statement of Education**

- Are you a high school graduate?  YES  NO  
 If not, what is the highest grade that you have competed? \_\_\_\_\_
- Have you attended a trade-related vocational school?  YES  NO  
 If so, give dates: from \_\_\_\_\_ to \_\_\_\_\_  
 Hours of instruction: \_\_\_\_\_ hours \_\_\_\_\_ years  
 Did you graduate?  YES  NO
- Are you a college graduate?  YES  NO  
 If so, describe degree received: \_\_\_\_\_  
 If not, list the number of credits earned: \_\_\_\_\_

List any technical or educational classes, courses, etc. pertaining to your trade

	COURSE NAME	ADDRESS	DATES
1.			
2.			
3.			

**Have you ever been convicted of any crime, felony, misdemeanor, or violation? Check one:**  YES  NO  
**If Yes, please explain and enclose a certified copy of the disposition (DISPOSITION MUST ACCOMPANY APPLICATION):** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*This application must be notarized on the next page.*

<b>FOR OFFICE USE ONLY:</b>	<input type="checkbox"/> APPROVED	<input type="checkbox"/> DISAPPROVED
_____		
_____		
_____		
_____		
_____		
_____		
_____		

**In consideration** of being granted certification for conducting the business or trade of plumbing or similar mechanical trade it is agreed that the applicant will comply with the rules and regulations of the Putnam County Office of Consumer Affairs.

**PENALTY FOR FALSIFICATION: Any persons making any false statements as to qualifications and experience, or any person subscribing to or vouching for any misstatement shall be subject to those penalties as provided by New York State laws.**

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date