



CC0100

## Registered Unlicensed Plumber Work Experience Verification Form

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| <b>Registered Unlicensed Individual:</b> _____<br><b>Registration Number:</b> _____ <b>SSN – Last 4 Only:</b> _____<br><b>Registration Period From:</b> _____ <b>To:</b> _____ | <b>(DLI Office Use)</b><br><b>(Date Received ONLY)</b> |
|--|--|

To renew a registration, unlicensed individuals must provide verification of their employment by a licensed contractor or registered employer for the registration period. Verification information required includes: name, address, and phone number of the employer, registered individual's dates of employment with the employer, class of work performed; and hours worked. The information provided on this form is public data and shall be used to qualify the registered unlicensed individual for an applicable license exam. **Individuals with multiple employers during the reporting period must make copies of the form and have each employer complete a separate verification.**

**PRINT IN INK or TYPE**

|  |                                  |
|--|----------------------------------|
| EMPLOYER NAME                                  | LICENSE / REGISTRATION NUMBER    |
| EMPLOYER ADDRESS                               | PHONE NUMBER                     |
| CITY STATE ZIP CODE                            | EMAIL ADDRESS                    |
| RESPONSIBLE INDIVIDUAL (LICENSE CLASS: PM, MR) | RESPONSIBLE INDIVIDUAL LICENSE # |

Qualifying work experience is verified based on a 12-month registration period. Actual hours must be reported by Class of Work performed by the registered individual. Blanks will be recorded as 0 hours. No more than a total of 1,750 qualifying hours may be reported per 12-month registration period. Hours reported on this form must be supported by records maintained by the employer for demonstrating compliance. Knowingly providing inaccurate or fraudulent information may constitute a violation and subject the violator to a civil penalty of up to \$10,000.

|  |  |
|--|--|
| Dates of Employment between Start Date and End Date<br>FROM: _____ TO: _____ | Are the hours reported on this form taken from payroll records?<br><input type="checkbox"/> YES <input type="checkbox"/> OTHER (specify) _____ |
|--|--|

| Class of Work  | Hours Worked |
|--|--------------|
| <b>DRAIN, WASTE, AND VENT INSTALLATION</b>                           |              |
| <b>FIXTURE INSTALLATION</b>  |              |
| <b>MAINTENANCE AND REPAIR OF PLUMBING</b>                            |              |
| <b>WATER DISTRIBUTION INSTALLATION</b>                               |              |
| <b>WATER SERVICE AND SEWER INSTALLATION</b>                          |              |
| <b>TOTAL OF ALL QUALIFYING HOURS WORKED (Maximum of 1,750 hours)</b> |              |

**Form must be signed by the designated Responsible Person and Registered Unlicensed Individual.**

I certify that I personally know or that the employer's employment records verify that this registered unlicensed individual, during the referenced registration period, engaged in the identified classes of work for the number of hours shown. The Registered Unlicensed Individual's signature acknowledges agreement with the information provided on this form.

|                                |             |                                   |             |
|--------------------------------|-------------|-----------------------------------|-------------|
| RESPONSIBLE PERSON'S SIGNATURE | DATE SIGNED | REGISTERED INDIVIDUAL'S SIGNATURE | DATE SIGNED |
|--------------------------------|-------------|-----------------------------------|-------------|

# INSTRUCTIONS

## READ CAREFULLY BEFORE COMPLETING THIS FORM

### Employer must complete the Work Experience Verification Form.

#### WORK EXPERIENCE VERIFICATION FORM REQUIRED

Registered unlicensed individuals, as part of renewing their registration, must provide verification of their employment by a licensed contractor or registered employer during the registration period. This form reports the verified hours and is adapted for use by unlicensed individuals registered to perform electrical, plumbing, and high pressure pipefitting work. The reason for verifying work hours each year along with renewing a registration is so the registered individual does not have to verify these hours when applying for a license examination. Verifying hours annually when renewing a registration enables the department to gradually qualify an individual for examination, which makes for quicker approvals.

#### Registered Unlicensed Individual

- Registration information is pre-printed on the form for the registered individual.
- The work period being verified is the 12-month registration period printed on the form.
- Address information printed on the form is the unlicensed individual's mailing address. Updates to the individual's personal or mailing address may be noted on the registration renewal form. Address changes may also be made using a form available online at [www.dli.mn.gov/cclid.asp](http://www.dli.mn.gov/cclid.asp).

#### Employer Information (mandatory information)

- Enter the employer's business name, address, license or registration number, contact's phone number, and email address. (NOTE: License number is mandatory, if business holds contractor license number.)
- Enter the employer's designated responsible individual's name and license number. The individual's license number must match what the department has on record as the designated responsible individual and license number.

#### Unlicensed Individual's Work Experience

- Provide exact dates of employment during the 12-month registration period (see dates printed on the verification form). Include the month, day, and year.
- Indicate whether the hours reported on the form are taken from payroll records; and if not, specify the other forms of documentation used to verify the individual's work experience.
- For each class of work identified, enter the actual hours the individual performed that class of work during the registration period. (Note: Blanks will be assigned 0 hours.)
- Enter the total number of plumbing work hours verified, which may not exceed 1,750 hours.

#### Certification Signature and Date

- The employer's designated responsible individual must certify, with a signature, that the registered unlicensed individual performed the identified classes of work for the number of hours entered on the form during the 12-month registration period.
- The registered unlicensed individual's signature on the form acknowledges agreement with the information verified by the employer.

#### QUALIFYING FOR A LICENSE EXAMINATION

Work verification is for the following license classifications, which require a minimum number of months/hours qualifying work experience to become licensed. Detailed information on qualifying for a license exam is available at [www.dli.mn.gov/cclid.asp](http://www.dli.mn.gov/cclid.asp).

| <u>License Class</u>           | <u>Law (Rule)</u>    | <u>Requirement</u>      | <u>Minimum Requirements</u>   |
|--------------------------------|----------------------|-------------------------|---|
| Journeyman Class A Electrician | 326B.33 (3800.3520)  | 48 Months (8,000 hours) | 2 years electrical installation   |
| Journeyman HPP Pipefitter      | 326B.921 (5230.0080) | 4 Years (8,000 hours)   | 4 years HPP work  |
| Journeyman Plumber             | 326B.46 (4716.0020)  | 7,000 hours             | 2000 hours water distribution<br>2000 hours drain, waste, vent<br>1000 hours fixture installation |
| Maintenance Electrician        | 326B.33 (3800.3520)  | 48 Months (8,000 hours) | 2 years electrical maintenance  |
| Power Limited Technician       | 326B.33 (3800.3520)  | 36 Months (6,000 hours) | 1 year technology installation  |