Department of Labor and Industries
Plumber Certification
PO Box 44470
Olympia WA 98504-4470
Phone: 360-902-5207

Application for Plumber Trainee Certification

Submit a fee of **$56.40** (GL Code 2150) with the application. Make checks payable to Department of Labor and Industries.

Applicant Information

	Social Security No. or Individual Tax Identification Number(required)
Name (Last, First, Middle)	Date of Birth
Address	Phone Number
City State Zip Code	County
Email	

Is this your first application?   ☐ Yes   ☐ No

Are you in an approved plumber apprenticeship program? If so, attach a copy of your apprenticeship card.   ☐ Yes   ☐ No

Experience Requirements

- All experience must have been for a registered contractor and under the supervision of a certified plumber.
- All plumber trainee cards will show the level of supervision that is required.
- Washington hours will not be credited if you did not have a current plumber trainee certificate.

Examination Type	Requirements
Residential Service	Two years or more (at least 4,000 hours) working as a plumber trainee under the supervision of a journey level, residential specialty, or residential service certified plumber. Note: The first year or more (at least 2,000 hours) must be spent working under the direct supervision of a journey level or residential specialty plumber.
Residential Specialty	6,000 hours of experience in residential or commercial plumbing.
Journey Level	8,000 hours of experience. A minimum of 4,000 hours of this time must have been in the commercial plumbing trade.
Domestic Pump	2,000 hours experience in this specialty.
Pump and Irrigation	4,000 hours experience in this specialty.
Domestic Pump or Pump and Irrigation work requires electrical trainee card or electrical certification in that specialty.	Electrical certification required.

Signature

I hereby certify that the statements on this application are true and accurate.

See RCW 18.106 and WAC 296-400A-130 for penalties for false statements or material misrepresentation.

I declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

_____   _____

Signature of Applicant   Date

Department Use Only

Effective Date   Certificate Number   Expiration Date

_____   _____   _____