



**STATE OF IDAHO DIVISION OF BUILDING SAFETY**

1090 East Watertower Street, Suite 150

Meridian, Idaho 83642

Ph: 800-955-3044

Fax: 877-810-2840

[customer.service@dbs.idaho.gov](mailto:customer.service@dbs.idaho.gov)

**APPLICATION FOR PLUMBING APPRENTICE WORK REGISTRATION**

**Idaho Statutes and Rules are subject to change and it is the registrant's responsibility to ensure they have read and understand the requirements to do plumbing work in Idaho. Idaho Statutes and Rules can be found online at: <https://dbs.idaho.gov/rules/current.html>.**

**IDAPA 07.02.05.010 Licensure History**

An applicant for any plumbing registration or certificate of competency who has been previously licensed as a journeyman or master plumber in any recognized jurisdiction is required upon application to the Division of Building Safety to disclose such licensure history and provide sufficient proof thereof. **An applicant for any plumbing registration or certificate of competency who has been previously licensed as a journeyman or master plumber in any recognized jurisdiction shall not be issued a plumbing apprentice registration.**

**In order to qualify for the Plumbing Apprentice registration an applicant must:**

- Be a minimum of 16 years of age.
- Submit a completed notarized application (included).
- Pay the \$50 (non-refundable) license registration fee.

**IDAPA 07.02.05.011. APPRENTICE REGISTRATION.**

A person wishing to become a plumbing apprentice shall register with the Division of Building Safety prior to going to work. All apprentices shall pay the registration fee as prescribed by Section 54-2614, Idaho Code. The minimum age for any apprentice shall be sixteen (16) years. No examination is required for such registration. In order to maintain registration, the apprentice shall renew his registration in accordance with Sections 54-2614 and 54-2614A, Idaho Code. (3-29-12)

**01. Work Requirements.** A plumbing apprentice must work at the trade under the constant on-the-job supervision of a journeyman and in the employ of a contractor for a total of four (4) years, defined as a minimum of eight thousand (8,000) hours work experience **in order to be eligible** for a journeyman certificate of competency. (3-29-12)



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**02. Schooling Requirements.** A plumbing apprentice must complete an Idaho Plumbing Board approved related course of instruction for four (4) years **in order to be eligible** for a journeyman certificate of competency. Unless prior approval has been granted by the Division of Building Safety, the apprentice must complete the required course work sequentially: year one (1) must be completed prior to beginning year two (2); year two (2) must be completed prior to beginning year three (3); and year three (3) must be completed prior to beginning year four (4). A minimum of one hundred forty-four (144) hours of classroom or other Idaho Plumbing Board-approved instruction time per school year is required. A grade average of seventy percent (70%) must be attained in these courses. Upon completion of apprenticeship schooling, the apprentice must obtain a certificate of completion, or a letter signed by the chairman of his apprenticeship committee and attach the certificate or letter to his application for a journeyman license. (3-29-12)

**PLUMBING APPRENTICESHIP SCHOOLS**

<b><u>College of Southern Idaho</u></b>	<b><u>(800) 680-0274</u></b>
<b><u>College of Western Idaho</u></b>	<b><u>(208) 562-3000</u></b>
<b><u>Eastern Idaho Technical College</u></b>	<b><u>(800) 662-0261</u></b>
<b><u>Idaho State University</u></b>	<b><u>(208) 282-3372</u></b>
<b><u>Lewis Clark State College</u></b>	<b><u>(208) 792-2442</u></b>
<b><u>North Idaho College</u></b>	<b><u>(208) 769-3214</u></b>
<b><u>Treasure Valley Community College</u></b>	<b><u>(541) 881-5755</u></b>
<b><u>Boise Plumbing JATC*</u></b>	<b><u>(208) 288-1296</u></b>
<b><u>Pocatello Plumbing JATC*</u></b>	<b><u>(208) 232-6806</u></b>

**\*Joint Apprenticeship and Training Committee**



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**APPLICATION FOR PLUMBING APPRENTICE WORK REGISTRATION**

**YOU MUST PROVIDE A COPY OF LEGAL IDENTIFICATION (Driver's license, Passport, Military ID)**

Are you currently serving in the US military, a veteran or spouse of any such person? Yes \_\_\_\_\_ No \_\_\_\_\_

Applicant's Legal Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Contact Phone Number(s): \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

*(All future notifications will be done via email.)*

Have you ever held a plumbing license in another jurisdiction? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, attach a copy of the license.

Please be advised that the DBS shall consider the address provided by the applicant on this form as the business address of record for the applicant, which may be subject to public disclosure in accordance with the Idaho Public Records Act (I.C. §101 *et seq.*). Because the address will be used for the purposes of all correspondence from the DBS with the license/registration holder, please be sure to provide an address that will be accurate for the duration of license or registration period. By providing this application the successful applicant acknowledges that upon request DBS may disclose the address as a public record, and the applicant provides his/her consent to do so.

I also hereby authorize the Idaho Division of Building Safety to release the last 4 (four) numbers of my Social Security Number for verification purposes.

I certify the information above is correct and acknowledge I have read and understand the Idaho plumbing apprentice requirements in IDAPA 07.02.05.010 and .011.

\*Signature: \_\_\_\_\_ \*Date: \_\_\_\_\_

**THIS SECTION TO BE COMPLETED BY A NOTARY PUBLIC**

State of \_\_\_\_\_

The above individual appeared before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

NOTARY SEAL:

\_\_\_\_\_  
Signature of Notary Public

Commission Expires: \_\_\_\_\_



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**PLUMBING WORK VERIFICATION FORM**

**(Please submit a separate form for each employer)**

**SELF-VERIFICATION WILL NOT BE ACCEPTED**

Applicant's Legal Name: \_\_\_\_\_ License # if required: \_\_\_\_\_

Employer/Verifier: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_

From: (month/day/year)

To: (month/day/year)

**Total hours performing plumbing work for this employer for the time period noted above:** \_\_\_\_\_

Was this work done in the State of Idaho? No \_\_\_\_\_ Yes \_\_\_\_\_ State \_\_\_\_\_

(If the work was performed in multiple states, a separate verification form is needed for each state. Listed license numbers must reflect the state in which the work was performed.)

I swear (or affirm) under penalty of perjury that the foregoing information is true, complete, and correct.

Employer's Authorized Signature

Date

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