



CC0503

Mailing Address:  
 PO Box 64217  
 St. Paul, MN 55164-0217

Email: dli.license@state.mn.us  
 Website: www.dli.mn.gov  
 Phone: (651) 284-5031

## Unlicensed Individual – HPP Registration Application / Renewal

**PAID APPLICATION FEE IS NOT REFUNDABLE  
 CASH IS NOT ACCEPTED BY MAIL OR WALK-IN**

**MAKE CHECK OR MONEY ORDER PAYABLE TO:  
 MINNESOTA DEPARTMENT OF LABOR & INDUSTRY**

**SPACE IN BOX FOR OFFICE USE ONLY**

**SELECT YOUR FORM OF REGISTRATION:**

- New Registration** **\$14.00**
- Renew Registration (not expired)** **\$14.00**
- Renew Registration (expired)** **\$19.00**
- Reinstate Registration (expired over 12 mo)** **\$19.00**

**Account Number** 632457 **STK** B42HPPLIC

**Check Number** **Amount Paid**

**PCK**  **CCK**  **MO** **DLI Deposit Date**

**NOTICE:** Pursuant to Minnesota Statute § 604.113, checks returned for non-payment will be charged a \$30 service charge and may subject the issuer to additional civil penalties.

If you are or were registered as an unlicensed individual to install high pressure piping (HPP), provide your registration number. **REGISTRATION NUMBER**

**PRINT IN INK OR TYPE  
 MAKE A COPY OF THIS APPLICATION FOR YOUR RECORDS**

**APPLICATION NUMBER:**

**NEW REGISTRATION**

Individuals performing HPP work without a Minnesota HPP Pipefitter's license must be registered as an unlicensed individual. Select New Registration if you have never been previously registered as an unlicensed individual.

**RENEW REGISTRATION**

Individuals who have a registration that is current or has been expired for less than 12 months may renew the registration. Renewing a registration prevents the loss of accrued work experience.

**A late fee of \$5.00 is required for late renewals (DLI receives after expired).**

**REINSTATE REGISTRATION**

Unlicensed individuals performing HPP work may reinstate a registration that has been expired for more than 12 months. Accrued work experience during the unregistered period is lost and may not be applied toward licensure.

The information you as an individual provide in this application will be used by Department of Labor & Industry staff members to determine if you meet the Department's registration requirements. Minnesota Statute § 270C.72, Subd. 4, requires you to provide your social security number on this application. The other information is being requested for purposes of processing your application. With the exception of your Social Security, you are not legally required to supply the requested data on this application; however, failure to provide the requested information may delay the processing of your application or result in the denial of the same. Except for your name and designated address, the information you provide on this application is private data while the application is pending. Disclosure of this information to others may occur as authorized or required by law, including but not limited to the Attorney General's Office, the Department of Revenue, the Department of Human Services, upon court order, and/or for the purpose of verification and investigation. Once you are registered, the information you provide, other than your Social Security Number and non-designated address, becomes public data and may be released to anyone upon request.

<b>SOCIAL SECURITY NUMBER</b>	<b>DATE OF BIRTH (MM/DD/YYYY)</b>	<b>AREA CODE &amp; PHONE NUMBER</b>	<b>E-MAIL ADDRESS</b>
<b>LEGAL LAST NAME</b>	<b>SUFFIX (JR, SR, II, III)</b>	<b>LEGAL FIRST NAME</b>	<b>LEGAL MIDDLE NAME</b>
<b>RESIDENTIAL ADDRESS</b>		<b>PUBLIC MAILING ADDRESS (if different from residential address)</b>	
<b>CITY NAME</b>	<b>STATE</b>	<b>ZIP CODE</b>	<b>CITY NAME</b>
			<b>STATE</b>
			<b>ZIP CODE</b>

Is the Residential address above a non-designated (private) address?  Yes  No If **yes**, then you must provide a designated (Public) mailing address.

**APPLICANT SIGNATURE** **DATE SIGNED (MM/DD/YYYY)**