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PLUMBING

Work Experience Verification Form

PRINT clearly IN INK OR TYPE
MAKE A COPY OF THIS FORM FOR YOUR RECORDS

Applicant's Legal Name:	License / Registration Number: (if applicable)	SSN: (Last 4 digits Only)
Applicant's Address:	City, State, Zip	Email Address:

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.**

Employer Name	License / Registration Number		
Employer Address	Telephone		
City	State	Zip	Email Address
Name of Responsible Person (Master Plumber)	License Number	Title	

Qualifying work experience is verified based on a 12-month registration period of July 1 to June 30. 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.

Complete a SEPARATE work experience form for each year of employment.		Are the hours reported on this form taken from payroll records?	
Date of Employment:		<input type="checkbox"/> YES <input type="checkbox"/> OTHER (specify)	
Start Date:	End Date:		
July 1 _____			
CLASS OF WORK	For Office Use Only	Hours Worked	
DRAIN, WASTE, AND VENT INSTALLATION	DW		
FIXTURE INSTALLATION	FI		
MAINTENANCE AND REPAIR OF PLUMBING	MR		
WATER DISTRIBUTION INSTALLATION	WD		
WATER SERVICE AND SEWER INSTALLATION	WS		
TOTAL OF ALL QUALIFYING HOURS WORKED (MAX 1,750 HOURS PER YEAR)			

Form must be signed by the designated Responsible Person and Applicant. I certify that I personally know or that the employer's employment records verify that this individual, during the referenced employment period, engaged in the identified classes of work for the number of hours shown. The applicant's signature below acknowledges agreement with the information provided on this form.

RESPONSIBLE PERSON'S SIGNATURE	DATE SIGNED	APPLICANT'S SIGNATURE	DATE SIGNED
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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 of July 1 to June 30. This form reports the verified hours and is adapted for use by unlicensed individuals registered to perform plumbing 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. Please submit a separate work experience form for each year of experience.

Employer Information (mandatory information if business is licensed in Minnesota)

- 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 or registered employer number in Minnesota.)
- 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.
- Only record work experience for the time period that the registered unlicensed plumber had a current registration with Department of Labor Industry.

Registered Apprentice - If part of an apprenticeship program the following is required when applying for the journey worker exam:

- Complete exam application.
- Letter from apprenticeship program, which includes hours, dates of completion and name of the apprenticeship program.

Unlicensed Registered Plumber

- Complete information on the form for the registered individual.
- The work period being verified is the 12-month registration period of July 1st to June 30th of each year and only for the months in which you had a current registration with Department of Labor & Industry.
- Provide exact dates of employment during the 12-month registration period (July 1st to June 30th). 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.
- Complete mailing address information for the unlicensed individual's. 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 <http://www.dli.mn.gov/workers/plumber/licensing-personal-plumber-licenses>.

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

License Class	Law (Rule)	Requirement	Minimum Requirements
Plumber Journey Worker	326b.46 Law 4716.0020 Rule	7,000 hours	2000 hours drain, waste, vent installation 1000 hours fixture installation 2000 hours water distribution installation
Plumber Master	326B.46 Law 4716.0020 Rule	1, 750 hours	Must have at least one year of practical plumbing experience as a licensed journey worker plumber; or A current master plumber license from another state where the requirements of the licensing jurisdiction are equivalent to those of Minnesota, as determined by the commissioner; or A current Minnesota restricted master plumber license and five years of verifiable experience in business as a plumbing contractor in Minnesota.