



**Master Plumber or  
Master Fire Suppression Piping Contractor  
Experience Verification Form  
Rev. 12/14**

Applicant Name: \_\_\_\_\_  
(Print)

Plumbing/Fire Suppression Business where applicant was supervised: \_\_\_\_\_  
(Print)

**Instructions to the Applicant**

Please print your name and the of the company for which you worked and give a copy of this form to **EACH** licensee that you have worked for during the timeframe you are claiming as qualifying experience.

**Instructions to Supervisor/Licensee**

The above applicant has applied to become a Licensed Master Plumber (LMP) or Licensed Master Fire Suppression Piping Contractor (LMFSPC) with the New York City Department of Buildings. The Applicant indicated in their application that they worked under your supervision while working for the above business/firm and that you were license to perform such work during his employment.

If the applicant had more than one direct supervisor, please photocopy this verification form and have each supervisor **SEPARATELY** complete their verification and return it to the applicant.

Please read and follow these directions before filling out the form:

- All sections of this verification form must be completed by the **LMP** or **LMFSPC** whom directly supervised the Applicant. It **MAY NOT** be completed by an Office Manager or Personnel/Human Resources employee.
- The **LMP** or **LMFSPC** and **NOT THE APPLICANT** must complete all portions of this verification form. It must be **signed** and **notarized**.
- Please list **ONLY** the job duties the Applicant performed under your direct supervision.
- Answer **every** question or **indicate "N/A"** (not applicable) when the question does not apply to you.
- Please attach copies of the **ACTIVE** Master Plumber or Master Fire Suppression Piping Contractor licenses you currently hold and held when the applicant was under your supervision.
- If the licensee supervised applicant at more than one business please photocopy and fill out additional verification forms.
- Once completed, please give the original notarized verification(s) to the applicant who will then submit the forms to the **New York City Department of Buildings**.

YOUR FAILURE TO RESPOND **MAY RESULT IN THE APPLICANT'S DISQUALIFICATION** FOR THIS LICENSE, AND/OR YOU BEING REQUIRED TO TESTIFY IN FRONT OF THE MASTER PLUMBER/MASTER FIRE SUPPRESSION PIPING CONTRACTOR BOARD.



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LICENSEE INFORMATION:

Your name:
Your current job title:
Your current telephone number: Fax number:
Your title when supervising the Applicant (if different)
Are you currently a NYC LMP? Yes No
If yes, list License #: Date of Issuance:
Are you currently a NYC LMFSPC? Yes No
If yes, list License #: Date of Issuance: LMFSPC Class:
License #: Date of Issuance: LMFSPC Class:
Since your license was issued, was there any period where your license(s) was not active? Yes No
If yes, list the License#(s) and the time period(s) when your license(s) was inactive:
Current LMP/LMFSPC Business (if different):

Please list any additional ACTIVE LMP/LMFSPC license(s) you hold (not in NYC) and the jurisdiction of licensure (please attach copies):

License #: Jurisdiction of Issuance: Date of Issuance:
License #: Jurisdiction of Issuance: Date of Issuance:
Since your license(s) was issued, was there any period where your license(s) was not active? Yes No
If yes, list the License#(s) and the time period(s) when your license was inactive:

CURRENTLY INACTIVE License:

NYC LMP inactive license #: LMFSPC inactive license #
(US) Jurisdictions: inactive license # Jurisdiction: Date of Issuance:

APPLICANT'S EMPLOYMENT INFORMATION:

If you supervised the applicant over more than one time frame, please make additional copies of this page for each supervision period or if the applicant was employed at your firm for multiple time periods, please make additional copies for each employment period. Number # of additional pages:

Employed From: To:
Was the applicant under your direct and continuing supervision? Yes No
If no, please explain here:



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Were you licensed as a LMP/LMFSPC while the Applicant was under your supervision? Yes [ ] No [ ]

If no, please explain here: \_\_\_\_\_

While under your direct and continuing supervision, was the applicant:

a. Employed on a full time basis? Yes [ ] No [ ]

If no, please explain here: \_\_\_\_\_

b. Did this full-time employment include the planning or design of plumbing and/or fire suppression systems (as defined below)? Yes [ ] No [ ]

If no, please explain here: \_\_\_\_\_

c. Did this full-time employment include the installation of plumbing and/or fire suppression systems (as defined below)? Yes [ ] No [ ]

If no, please explain here: \_\_\_\_\_

Was the applicant under your payroll (or the payroll of your employer)? Yes [ ] No [ ]

If not, please explain here and attach documentation that would reflect the relationship you and/or your company had with the applicant's employer during your supervision.

Please fill out chart on page 4.

Are you aware of any acts or omissions by the applicant that may reflect on the applicant's moral character?

Yes [ ] No [ ]

Explain:

\_\_\_\_\_
\_\_\_\_\_

PLUMBING SYSTEM. Includes the water supply and distribution pipes; plumbing fixtures and traps; water-treating or water-using equipment; soil, waste and vent pipes; sanitary and storm sewers and building drains; in addition to their respective connections, devices and appurtenances within a structure or premises. Plumbing work includes the installation, modification, alteration or extension of plumbing, standpipe where a sprinkler is not connected or is not now being connected, domestic water, connections to the domestic water, combination domestic water and reserve standpipe supply tank up to and including the roof tank check valve, gas piping or any piping system referred to in the New York city plumbing code, and/or up to thirty sprinkler heads off the domestic water in any building. Also, ordinary plumbing work as defined in Chapter 4 of the NYC Administrative Code may be considered installation work.

FIRE SUPPRESSION PIPING SYSTEM. Includes any and all equipment and materials in connection therewith, with the exception of any electrical components, the purpose of which is to control, contain, suppress or extinguish fire and shall include:

- 1. The systems, materials and equipment described or referred to in this code (with the exception of any electrical components) which systems, materials or equipment shall include any standpipe system to which a sprinkler system is or is now being connected; provided, however, that such systems, materials or equipment shall not include any systems, materials or equipment constituting plumbing work, with the exception of up to thirty sprinkler heads off the domestic water in any one building; or
2. Any dry, liquid or gaseous chemical fire containment, suppression, control or extinguishing system or any other device or means of control, suppression, containment or extinguishing of fire (with the exception of any electrical components) but not including portable fire extinguishers.



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For the time the Applicant was under your supervision, please provide the required information below:

You must provide a detailed description of the work the Applicant performed in each title. Just stating that the applicant worked in “design and installation” is not enough. You must clearly describe the work (e.g, cutting pipe, providing calculations, installing fixtures using certain types of tools, etc.) the applicant performed during his or her employment and the types of jobs on which the Applicant worked (new buildings, gut renovation, bathroom renovation, kitchen, and premises/permit information by way of example)

Applicant's Title	Time period	Wages per hour	Hours per wk	Describe type of work performed: (Please describe ALL types of work and provide examples)

Applicant's Name \_\_\_\_\_

Licensee Initial here \_\_\_\_\_



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Did the applicant perform design and installation work that would be exempt from any work permit requirements? Yes [ ] No [ ]

If yes, please explain here:

Three horizontal lines for explaining the answer to the exemption question.

Additional Comments regarding Applicant's experience and ability:

Three horizontal lines for providing additional comments.

Please note: Failure to completely and accurately provide a detailed description of the applicant's work will result in your required testimony and questioning by the Master Plumber and Master Fire Suppression Piping Contractor Board.

I have voluntarily provided the attached information on the verification form regarding this Applicant. I attest and affirm to the truthfulness of my statements and fully understand that any false statement or any material omission made in connection with this document is sufficient cause for The City Of New York to deny the license being sought by the applicant. I also understand and agree that that any false statement or any material omission made in connection with this document is sufficient cause for the City Of New York to invalidate, rescind or revoke any and all licenses and/or registrations that were issued to me under the jurisdiction of the NYC Department of Buildings. False Statements are punishable as a class A misdemeanor pursuant to 210.45 of the penal law.

Print your name: \_\_\_\_\_

Your signature: \_\_\_\_\_

Date: \_\_\_\_\_

STATE OF \_\_\_\_\_ )
COUNTY OF \_\_\_\_\_ ) SS:

On the \_\_\_\_\_ day of \_\_\_\_\_ in the year \_\_\_\_\_, the undersigned, \_\_\_\_\_, personally known to me or proved to me on the basis of satisfactory evidence, personally appeared before me and subscribed his/her name to the above Verification and, after being duly sworn upon his oath, says that the facts alleged in the foregoing affidavit are true.

\_\_\_\_\_)
(NOTARY PUBLIC)

Licensee (PLACE SEAL) here: