

The Commonwealth of Massachusetts

Department of Public Safety

Application for *Grandfathered Master Process Piping Pipefitter License*

NOTE: Please complete only the 1st & 2nd page of this application if you currently hold a license under M.G.L. c. 146 § 84 or M.G.L. c. 142 § 3. All other applicants with at least four years of experience must complete the full application for consideration.

Applicant Information (please print clearly)

Last Name (write above the line)	First Name	Middle Initial	Social Security Number (required)	
Residence Address			Date of Birth	
City			State	ZIP Code
Home Phone	Email Address*			
Name of Business			Work Phone	
Street Address	City	State	ZIP Code	
Current Occupation	Indicate any building or trades license (s) currently held (attach additional pages if necessary)			

License under the Grandfather Provisions

Please review the required minimum qualifications found on the Letter of Attestation page.

I, _____, being the person referred to in the application for a license as outlined in M.G.L. c. 146 § 85, do solemnly swear that the statements herein made are true and correct; that the application is made in good faith; that I have complied with all the requirements of law to the best of my knowledge and belief; that I am familiar with and have available to me a copy of M.G.L. c. 146, 528 CMR, and 522 CMR 17; and that I meet all qualifications to be licensed by the Bureau of Pipefitters, Refrigeration Technicians, and Sprinklerfitters. Also, I hereby attest to the fact that I have READ and UNDERSTAND the minimum qualifications for the category of license sought and attest that I meet or exceed these qualifications by virtue of my experience. Under the penalties of perjury, I declare that the information contained herein is true, correct and complete. I further understand that a false statement made in this affidavit and application is sufficient cause of rejection or revocation of a license issued. I certify under the penalties of perjury that to my best knowledge and belief, I have filed all state tax returns and paid all state taxes required under law.

Signature of applicant: _____ Date: _____

Please check here if you (the applicant) authorize the Department of Public Safety (DPS) to electronically access your photograph from the Massachusetts Registry of Motor Vehicles (RMV) database. If DPS cannot acquire a photo from the RMV please supply one as indicated below.

FOR DEPARTMENT USE ONLY		
License Number: _____	<i>Please return completed application along with a check for \$100.00 made payable to "Commonwealth of Massachusetts" and mail to: Department of Public Safety, Attention: Licensing Unit One Ashburton Place - Room 1301 Boston, MA 02108</i>	Affix 1" x 1¼" face photo here or provide authorization to use RMV photo.
Date of Issue: _____		
Expiration Date: _____		
Date Received: _____	Check Number: _____	Transaction Number: _____

***Please note that email is the primary means of contact for routine correspondence during the application process**

Minimum Qualifications for Grandfathered License

To be considered for a Master Process Piping Pipefitter license under the grandfathering provision, the applicant must meet one of the following prerequisites listed below. Please select a prerequisite and provide the required information that is listed in the box.

<input type="checkbox"/>	<u>Applicant's Licensed under M.G.L. c. 146 §84 or M.G.L. c. 142 §3</u>
	Please select the license which you currently hold from the list below and complete the required information:
	<input type="checkbox"/> <i>Master Pipefitter License</i> <input type="checkbox"/> <i>Master Plumber License</i>
	Name: _____ License Number: _____ Expiration Date: _____
	NOTE: Please submit a copy of the license you selected above with the completed application

OR

<input type="checkbox"/>	<u>Applicant's Not Licensed under M.G.L. c. 146 §84 or M.G.L. c. 142 §3</u>
	An applicant for license per M.G.L. c. 146 must demonstrate to the satisfaction of the Bureau that they have had at least four years' experience in the supervision of individuals engaged in the installation of commercial piping systems as defined by 528 CMR 11. Said experience must be within ten years of the date of this application. Acceptable evidence in demonstration of this requirement shall be in the form of a letter of attestation by the candidate indicating that he/she possesses such minimum qualification and identifying specific projects (spanning a period of at least four years during the noted time frame) in which the candidate was involved with piping installation projects, noting the name of the owner and address of said projects. Each applicant must also submit documentation from his or her employer that they have worked four years in the process piping system business in a management position or documentation that he or she is the owner, partner, officer, or in a full-time management position of a process piping system company.
	Please complete the provided <u>Letter of Attestation</u> and submit it with the completed application

Letter of Attestation

(List of Customer References for Grandfathered Master Process Piping Pipefitter License)

The intent of the grandfathered license is to transition to the new Process Piping requirements. It allows granting a Master Process Piping Pipefitter license to a person who has been actively engaged in Process Piping for at least four years.

*Instructions: List **five** different examples of piping installation projects on which you performed work. This piping work must have occurred within the last **ten** years and must span at least **four** years. All information must be provided in order for the Bureau to consider your experience in performing process piping. Remember to **sign this form**. Please attach additional pages if necessary.*

Building service piping such as steam and hot water heating, steam condensate, chilled water, refrigeration, and plumbing as defined under 248 CMR that are part of building systems that promote the safe, sanitary, and energy-efficient occupancy of a building should not be listed as work experience as they are not considered process piping.

Work Experience Example #1

Name and Complete Address of the Contractor/Employer at which Process Piping Installation Work Was Performed

Contact Person at the Contractor/Employer at which Process Piping Installation Work Was Performed

Telephone number of Contact

Address for the Project or Plant at which Process Piping Installation Work Was Performed

Beginning and End Dates of Process Piping Installation Work Experience

Total Number of Hours of Process Piping Work Experience

Type of Industrial Plant (check one):

Petroleum Refinery _____ Chemical _____ Pharmaceutical _____

Textile _____ Paper _____ Semiconductor _____ Cryogenic Fluids _____

Other (please specify) _____

Type/Nature of the Fluid Contained in Piping Installation Work Performed (check all that apply):

Petroleum products _____ Chemical _____ Steam _____ Air _____

Water _____ Fluidized Solids _____ Cryogenic Fluids _____

Other (please specify) _____

Work Experience Example #2

Name and Complete Address of the Contractor/Employer at which Process Piping Installation Work Was Performed

Contact Person at the Contractor/Employer at which Process Piping Installation Work Was Performed

Telephone number of Contact

Address for the Project or Plant at which Process Piping Installation Work Was Performed

Beginning and End Dates of Process Piping Installation Work Experience

Total Number of Hours of Process Piping Work Experience

Type of Industrial Plant (check one):

Petroleum Refinery _____ Chemical _____ Pharmaceutical _____

Textile _____ Paper _____ Semiconductor _____ Cryogenic Fluids _____

Other (please specify) _____

Type/Nature of the Fluid Contained in Piping Installation Work Performed (check all that apply):

Petroleum products _____ Chemical _____ Steam _____ Air _____

Water _____ Fluidized Solids _____ Cryogenic Fluids _____

Other (please specify) _____

Work Experience Example #3

Name and Complete Address of the Contractor/Employer at which Process Piping Installation Work Was Performed

Contact Person at the Contractor/Employer at which Process Piping Installation Work Was Performed

Telephone number of Contact

Address for the Project or Plant at which Process Piping Installation Work Was Performed

Beginning and End Dates of Process Piping Installation Work Experience

Total Number of Hours of Process Piping Work Experience

Type of Industrial Plant (check one):

Petroleum Refinery _____ Chemical _____ Pharmaceutical _____

Textile _____ Paper _____ Semiconductor _____ Cryogenic Fluids _____

Other (please specify) _____

Type/Nature of the Fluid Contained in Piping Installation Work Performed (check all that apply):

Petroleum products _____ Chemical _____ Steam _____ Air _____

Water _____ Fluidized Solids _____ Cryogenic Fluids _____

Other (please specify) _____

Work Experience Example #4

Name and Complete Address of the Contractor/Employer at which Process Piping Installation Work Was Performed

Contact Person at the Contractor/Employer at which Process Piping Installation Work Was Performed

Telephone number of Contact

Address for the Project or Plant at which Process Piping Installation Work Was Performed

Beginning and End Dates of Process Piping Installation Work Experience

Total Number of Hours of Process Piping Work Experience

Type of Industrial Plant (check one):

Petroleum Refinery _____ Chemical _____ Pharmaceutical _____

Textile _____ Paper _____ Semiconductor _____ Cryogenic Fluids _____

Other (please specify) _____

Type/Nature of the Fluid Contained in Piping Installation Work Performed (check all that apply):

Petroleum products _____ Chemical _____ Steam _____ Air _____

Water _____ Fluidized Solids _____ Cryogenic Fluids _____

Other (please specify) _____

Work Experience Example #5

Name and Complete Address of the Contractor/Employer at which Process Piping Installation Work Was Performed

Contact Person at the Contractor/Employer at which Process Piping Installation Work Was Performed

Telephone number of Contact

Address for the Project or Plant at which Process Piping Installation Work Was Performed

Beginning and End Dates of Process Piping Installation Work Experience

Total Number of Hours of Process Piping Work Experience

Type of Industrial Plant (check one):

Petroleum Refinery _____ Chemical _____ Pharmaceutical _____

Textile _____ Paper _____ Semiconductor _____ Cryogenic Fluids _____

Other (please specify) _____

Type/Nature of the Fluid Contained in Piping Installation Work Performed (check all that apply):

Petroleum products _____ Chemical _____ Steam _____ Air _____

Water _____ Fluidized Solids _____ Cryogenic Fluids _____

Other (please specify) _____

Please accept this letter of attestation to document my qualifications. I hereby declare, under penalties of perjury, that I possess at least four years' experience in the process pipefitting industry.

Signature _____ **Date** _____

Notary Public: _____ Date: _____ Expiration of Commission: _____

Signature