Iowa Plumbing & Mechanical Systems Board
Renewal Application

SUBMIT COMPLETED APPLICATIONS TO:
Iowa Dept. of Public Health
Plumbing & Mechanical Systems Board Office
321 E 12th Street
Des Moines, IA 50319

Applications postmarked <u>on or after January 1, 2013</u> will be required to submit all applicable renewal and late license fees prior to processing. *(See instructions for fee table.)*

Part I - Applicant Information

All items indicated by an * must be completed.

Last Name *	First Name *	Middle Initial
Date of Birth *	E-mail Address	Telephone *( )

Personal Mailing Address (Street or PO Box) * Address One:	Address Two:

City *	State *	County *	Zip Code *

Business Name:	Telephone ( )
Address One:	Address Two:

City	State	Zip Code

Please check which address to send correspondence: Business ☐ Personal ☐

The city/state of this address will be listed on licensediniowa.gov with the license status.

Part II – License Information

*Are you a registered contractor in the state of Iowa with Iowa Workforce Development?

☐ No ☐ Yes - IWD contractor registration number: _____

***For each license being renewed please check the box and write the license number in the box.**

	Plumbing	HVAC	Hydronics	Refrigeration
Apprentice (*active*)	☐ License #			
Journeyperson (*active*)	☐ License #	☐ License #	☐ License #	☐ License #
Master (*active*)	☐ License #	☐ License #	☐ License #	☐ License #
Inactive Master/Active Journey	☐ License #	☐ License #	☐ License #	☐ License #
Inactive License(s)	☐ Journeyperson ☐ Master License #	☐ Journeyperson ☐ Master License #	☐ Journeyperson ☐ Master License #	☐ Journeyperson ☐ Master License #

Medical Gas Piping Renewal -

Provider – Select One: ☐NITC ☐MGM ☐METC ☐EMGS ☐MGTC ☐AMS ☐Other - _____

Certification Number: _____ Date of expiration: _____

Note – *if Other is selected, the application will be reviewed by board before issuance*.

Journeyperson/Master Level License Renewal -

To complete the Continuing Education section below, identify the course name, course number and hours of credit for each course. Please note per Iowa Administrative Code r. 641—30.5(105) Audit of continuing education requirements. The board may conduct an audit of a licensee's license renewal application to review compliance with continuing education requirements. **For a renewal application more than 366 days past the expiration date, provide CEU information or Prometric examination information.**

Course Number: CEUC		**Course Name:**			**Course Date:**	
Please identify the number of hours for each selection below:						
Safety	Mechanical Code	HVAC	Hydronics	Refrigeration	Plumbing Code	Plumbing
Course Number: CEUC		**Course Name:**			**Course Date:**	
Please identify the number of hours for each selection below:						
Safety	Mechanical Code	HVAC	Hydronics	Refrigeration	Plumbing Code	Plumbing
Course Number: CEUC		**Course Name:**			**Course Date:**	
Please identify the number of hours for each selection below:						
Safety	Mechanical Code	HVAC	Hydronics	Refrigeration	Plumbing Code	Plumbing
Course Number: CEUC		**Course Name:**			**Course Date:**	
Please identify the number of hours for each selection below:						
Safety	Mechanical Code	HVAC	Hydronics	Refrigeration	Plumbing Code	Plumbing
If additional entries are needed a copy of this page may be included.						

Journeyperson/Master Renewal by Examination Option - (Valid only if 366 days or more past license expiration date)			
1st Passed Examination		**2nd Passed Examination**	
Examination Trade:		**Examination Trade:**	
Date of Examination:	**% Score:**	**Date of Examination:**	**% Score:**
Location of Examination:		**Location of Examination:**	
3rd Passed Examination		**4th Passed Examination**	
Examination Trade:		**Examination Trade:**	
Date of Examination:	**% Score:**	**Date of Examination:**	**% Score:**
Location of Examination:		**Location of Examination:**	

Apprentice Renewal–

Has your US Department of Labor sponsorship information changed? ☐ No ☐ Yes – If yes please provide your new sponsorship information below.

Apprentice Identification Number *:		Apprenticeship Start Date *:
Sponsor Name *:		Sponsor Department of Labor Program Number *:
Sponsor Mailing Address Line One: *		Sponsor Mailing Address Line Two:
City*	State*	Zip*
Sponsor Phone Number*		Sponsor E-mail Address

Part III – Screening Questions * (All required)

The following questions must be answered. If you answer "Yes" to questions below (1) attach a signed letter of explanation providing the details of the incident, (2) attach a copy of any court ordered evaluations, showing completion and recommendations, and (3) attach a copy of all official court documents regarding your conviction/malpractice suit, including final disposition and/or settlement. Your application will be referred to the Plumbing Board for review. You must answer "Yes" even when a conviction or judgment has been deferred or expunged from your record.	
During the previous licensing period have you ever been convicted, found guilty of or entered a plea of guilty or no contest to a felony or misdemeanor crime (Other than minor traffic violations with fines under $500)?	☐ Yes – Please see below. ☐ No
During the previous licensing period have you ever been investigated by a licensing, registration, or certification authority or organization; or had a licensing, registration, or certification authority or organization institute disciplinary action against you related to your professional practice?	☐ Yes – Please see below. ☐ No
During the previous licensing period have you ever been disciplined or sanctioned by any licensing, registration, or certification authority or organization related to your professional practice?	☐ Yes – Please see below. ☐ No
During the previous licensing period have you ever developed a medical condition which in any way impairs or limits your ability to practice your profession with reasonable skill and safety?	☐ Yes – Please see below. ☐ No
During the previous licensing period have you ever been engaged in illegal or improper use of drugs or other chemical mood altering substances?	☐ Yes – Please see below. ☐ No
If answering Yes to any of the above questions please provide a brief explanation:	

Part IV – Applicant Signature

I certify that I have carefully read the questions on this application and have answered them completely and truthfully. I declare under penalty of perjury that my answers, and all other statements or information submitted by me in this application process, are true and correct. If it is determined at any time that I have provided misleading or false information on, or in support of, this application, I understand that my license may be subject to disciplinary action, license revocation and criminal prosecution.

I also understand that this application is a public record in accordance with Iowa Code Chapter 22 and that application information is public information, subject to the exceptions contained in Iowa law. Finally, in submitting this application, I consent to any reasonable inquiry, including a licensing audit that may be necessary, to verify the information I have provided on, or in conjunction with, this application.

An applicant is responsible for the accuracy of the data regardless of who completes and submits the applicant's licensure application.

Incomplete applications shall be considered invalid after 90 days and shall be destroyed.

Applicants Printed Name *:	Applicants Signature *:
Date of Signature *:	

Privacy Act Notice: Disclosure of your Social Security Number is required by 42 U.S.C. § 666(a)(13) and Iowa Code § 252J.8 (1). The number will be used in connection with the collection of child support obligations and as an internal means to accurately identify licensees. This information may be shared with taxing authorities as allowed by law including Iowa Code § 421.18.

Social Security Number *	Last Name *

IOWA PLUMBING AND MECHANICAL SYSTEMS BOARD
INSTRUCTIONS FOR RENEWAL APPLICATION

Applications postmarked on or after January 1, 2013 will be required to submit appropriate renewal and late license fees as applicable.

An application is not considered complete and will not be processed until all items have been submitted as required. Online applications must be submitted with credit or debit card information. Paper application renewal fees must be paid with check or money order payable to: Iowa Plumbing and Mechanical Systems Board.

The following general information is required for all applications:

- Personal Information – Name, address (personal/business), date of birth, telephone.
- License Trade and Level – Identify licenses that are being renewed. For Master and Journeyperson applicants identify the specific trade(s) of plumbing, HVAC, refrigeration or hydronics. Apprentice licenses are universal to all trades.

Continuing Education Units for Master & Journeyperson Level Licenses
To complete the Continuing Education section, identify the course name, date of course, course number and hours of credit for each course.

Beginning November 7, 2012 journeyperson and master level licenses that are more than 366 days past the original expiration date of a license may renew by submitting continuing education courses taken one year or later past the expiration date or a successful completion of a Prometric examination for each trade license being renewed, along with appropriate fees.

All completed applications must be submitted with the proper fees to:

Iowa Plumbing and Mechanical Systems Board
Iowa Dept. of Public Health
321 E 12th Street
Des Moines, Iowa 50319

Additional information can be obtained online at: www.idph.state.ia.us/PMSB
Or by calling: 1-866-280-1521

Part I – Applicant Information

Name – Full name of applicant.
Mailing Address – Provide personal and business information. Identify which address is to be used for mailing correspondences. The identified address may be listed on licensediniowa.gov with license registration information or in public information requests. Identify if there has been a change in the personal or business address.

Part II– License

In order to qualify for the 30% multiple license discount and use CEU credits for multiple license renewals, all licenses need to be combined into one account number. If you hold more than one license number you will be asked to identify the license numbers and corresponding trades to be combined into one license number.

- Identify all disciplines (plumbing, HVAC, refrigeration, hydronics) and level (master, journeyperson, apprentice) of licensure. Include license number(s) & date of expiration.
- Identify whether you are seeking active or inactive status. Inactive licensees must meet the same continuing education requirements as active licensees.
- Medical Gas Pipe Certificate applicants must provide the NITC certification number or board approved certification number present on their card & the date of expiration.

Journeyperson/Master Level License Renewal

To complete the Continuing Education section, you will need to identify the course name, course number and hours of credit for each course. The board may conduct an audit of a licensee's license renewal application to review compliance with continuing education requirements per Iowa Administrative Code r. 641—30.5(105).The requirements for Continuing Education for master and journeyperson licenses are as follows:

Single License - Plumbing, HVAC, Hydronics or Refrigeration	**8 Total Hours of CEU** 2 Hours Safety 2 Hours Code (Applicable Plumbing or Mechanical) 4 Hours Discipline (Must be in current license discipline only.)
Multiple Licenses Renewed Same Expiration Date – Combination of 2 or 3 Mechanical Licenses (HVAC, Hydronics, or Refrigeration)	**14 Total Hours of CEU** 4 Hours of Safety 2 Hours of Mechanical Code 8 Hours of Discipline Note: Required discipline hours total 8 for the licensee. The 8 hours of discipline CEU's may be obtained from one or any combination of discipline licenses held by the licensee.
Multiple Licenses Renewed Same Expiration Date – Combination of 1 plumbing & 1 or more Mechanical Licenses (HVAC, Hydronics, &/or Refrigeration)	**16 Total Hours of CEU** 4 Hours of Safety 2 Hours of Mechanical Code 2 Hours of Plumbing Code 8 Hours of Discipline Note: Required discipline hours total 8 for the licensee. The 8 hours of discipline CEU's may be obtained from one or any combination of discipline licenses held by the licensee.
Multiple Licenses Renewed at Separate Expiration Dates –	A licensee who holds licenses with different expiration dates will be required to submit 8 CEU's for each single license. No fee discount will apply. Once CEU credits are applied to the renewal of a single license, the credits will not be eligible for use in renewal of any additional licenses. **8 Total Hours of CEU for each separate license** 2 Hours Safety 2 Hours Code (Applicable Plumbing or Mechanical) 4 Hours Discipline (Must be in discipline of the renewal license only.)

***Note, if applying for renewal at 366 or more days past the original expiration date, CEU's must be taken on a date that is more than 365 days from the expiration date. Ex: Original license expired 06/01/2011 then CEU's must be taken on or after 06/02/2012. These CEU's will not be eligible to renew any future license other than the current renewal license.**

Apprentice Renewal –

To complete the apprentice renewal section, please update any changes to the US Department of Labor sponsorship information. There are no CEU requirements for apprentice licenses.

Part III – Screening Questions –

All questions must be answered in order for the application to be processed. If you answer "Yes" to any of the questions, your application will be referred to the Plumbing Board for review. You must answer "Yes" even when a conviction or judgment has been deferred or expunged from your record. Please provide any pertinent details with your application.

Part IV – Applicant's Signature

Each applicant for licensure is required to submit their application with acknowledgement of the identified perjury statement. An applicant is responsible for the accuracy of the data regardless of whether an assistant completes and submits the applicant's licensure application.

Social Security Number – Privacy Act Notice: Disclosure of your Social Security Number is required by 42 U.S.C. § 666(a)(13) and Iowa Code § 252J.8(1). The number will be used in connection with the collection of child support obligations and as an internal means to accurately identify licensees, and may be shared with taxing authorities as allowed by law including Iowa Code § 421.18. This item will be found on the last page of the application.

Fee Information

Fees for a renewal application are as follows. Beginning January 1, 2013 all renewal license fees will apply. Applicable late fees apply to all renewal applications, regardless of postmark date.				
On or Before Expiration	**$0.00 prior to 12/31/2012 (Applicable renewal fees apply 01/01/2013)**			
1-30 Days past Expiration Date	**$0.00 Late Fees + *cost of renewal license per trade**	**No Exam**	**Issue/Expiration Stays the Same**	**Eligible to Work**
31-60 Days past Expiration Date	**$60.00 Late Fee per trade + *cost of renewal license per trade**	**No Exam**	**Issue/Expiration Stays the Same**	**Eligible to Work**
61-365 Days past Expiration Date	**$100.00 Late Fee per trade + *cost of renewal license per trade**	**No Exam**	**Issue/Expiration Stays the Same -**	**Ineligible to Work**
366 + Days past Expiration Date	***Cost of renewal license per trade**	**Exam *OR* CEUS**	**Issue/Expiration Become New Date of Issue**	**Ineligible to Work**

Renewal Fees					
Apprentice	$50.00	Journeyperson	$50.00 / trade	Master	$125.00 / trade
Specialty	$50.00	Med Gas	$50.00	Contractor	$150.00
InactiveMaster/Active Journey	$100.00 / trade	Inactive	$50.00 / trade		