



Occupational Trade License Application

→ **Instructions:** All applicants must review the **Candidate Information Bulletin** at www.psiexams.com.

- 1) This application must be completed and notarized by the individual applying for licensure.
- 2) **Fees:** Contractor \$150.00; Journeyperson \$90.00; Dealer-Tech \$200.00; Technician \$80.00; Driller (any type) \$88.00. A check and/or money order for the applicable fee made payable to PSI licensure:certification must accompany this application. Application fees are non-refundable.
- 3) Once this application is reviewed and approved, you will receive an **Examination Eligibility Postcard** from PSI with instructions to register and schedule the examination. Please note that an examination fee will be due at the time you schedule the examination with PSI.

Applicants must include the appropriate required documentation for each license type:

- **Journeyperson, Driller or Technician applicants** must attach the **original copy** of the Letter of Apprenticeship Completion Certificate. This can be obtained from the State of Connecticut, Department of Labor, Apprenticeship Training Division at (860) 263-6085 or www.ctapprenticeship.com.
- **Contractor or Dealer-Technician applicants** must have held the respective journeyperson, driller or technician license for a minimum of two (2) years prior to applying. You must attach a photocopy of your current license.
- **If applying for equivalent experience and training (any license type)**, submit notarized statements from occupational related employers as to the dates and duties of employment AND copies of any diplomas and degrees of education related to the occupational license type for which you are applying. Should your application not be approved, you will receive a deficiency letter with further directions.

→ **MAIL** your completed application and fee to:

PSI licensure:certification
3210 East Tropicana Ave
Las Vegas, NV 89121

For specific license types, contact
PSI licensure:certification
www.psiexams.com or 1-800-733-9267

Applicant Information:

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|--|---------------|------------------------|----------------------------|---------------|
| First Name, Middle Initial, Last Name | | | License Type Applying For: | |
| Residence Street Address | | City or Town | State | Zip Code |
| Telephone Number (w/ area code) | Email Address | Social Security Number | | Date of Birth |
| Mailing Address (if different from above) | | City or Town | State | Zip Code |
| Do you presently hold a license for your occupation in any State? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, attach a copy of your current license | | | | |
| Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | |

Notarization:

I, being duly sworn according to law, hereby affirm that the answers given in this application are true to the best of my knowledge and belief and that this application is made for the sole purpose of obtaining a license.

Signature of Applicant

Date

Subscribed and sworn to before me, this _____ day of _____ 20 _____

Signature of Notary Public, Justice of the Peace, Commissioner of Superior Court

My Commission Expires

