

STATE PLUMBING BOARD OF LOUISIANA

Administrative Office: 11304 CLOVERLAND AVENUE, BATON ROUGE, LOUISIANA 70809

PHONE: (225) 756-3434 FAX: (225) 756-3433



NATURAL GAS FITTER PRE-QUALIFICATION APPLICATION

*PLACE
PHOTO
HERE*

INSTRUCTIONS FOR SUBMITTING YOUR APPLICATION:

- 1.) Your **APPLICATION MUST BE COMPLETE AND NOTARIZED**. An incomplete form will result in a delay in processing.
- 2.) Place a 2" x 2" photograph in the upper right hand corner of the front of this form.
- 3.) Include a copy of a current Gas Fitter license from a municipality or parish government, OR must have held a journeyman license prior to July 1, 2016 and include a notarized affidavit from employer that you perform gas fitter work in their employ.
- 4.) Include a check or money order made out to the State Plumbing Board of LA in the amount of \$50.

Please mail applications to: State Plumbing Board of LA
11304 Cloverland Avenue
Baton Rouge, LA 70809

NAME (PLEASE PRINT)		LAST	FIRST	MIDDLE			
ADDRESS		NUMBER	STREET	CITY	STATE	ZIP CODE	
PARISH	SOC.SEC.NO.	-	-	DATE OF BIRTH	/	/	PHONE ()
PLUMBING LICENSE NO.		EMAIL ADDRESS					

EMPLOYING ENTITY _____ BUSINESS PHONE ()
(NAME OF COMPANY)

ADDRESS _____
NO. STREET CITY STATE ZIP CODE

PLEASE CHECK ONE: SOLE PROPRIETORSHIP () PARTNERSHIP () CORPORATION () LLC ()

Natural Gas Fitter License	\$ 40.00
Processing Charge: charged on all applications and licenses	\$ 10.00
TOTAL DUE	\$ 50.00

STATE OF LOUISIANA PARISH OF _____

I, _____ hereby apply to the State Plumbing Board of Louisiana for a Natural Gas Fitter license as indicated by completing the required application. I agree to abide by the Louisiana State Plumbing Law and Rules and Regulations of the Board, pay all the necessary fees and submit timely as required in the regulations. I certify that the information submitted on this application is true and correct to the best of my knowledge.

I HAVE READ AND SIGNED THE COPY OF INSTRUCTIONS BEFORE COMPLETING THE APPLICATION.

APPLICANT'S SIGNATURE _____

WITNESS _____

SUBSCRIBED AND SWORN TO BEFORE ME, THIS _____ DAY OF _____ 20 _____

**NOTARY
SEAL**

SIGNATURE OF NOTARY

THIS OATH MUST BE TAKEN BEFORE AN OFFICER AUTHORIZED TO ADMINISTER OATHS

AFFIDAVIT OF NATURAL GAS EXPERIENCE

STATE OF LOUISIANA PARISH OF _____

PRINT OR TYPE NAME OF APPLICANT

_____, Personally came and appeared before me the undersigned Notary,
who after being duly sworn did depose and state as follows:

- 1.) The undersigned applicant for application as a natural gas fitter by the Louisiana State Plumbing Board submits this affidavit pursuant to the provisions of LA. R.S. 37:1366 (D) for the purpose of certifying his work experience in the field of natural gas.
- 2.) The undersigned applicant is aware of the provisions of the law, particularly LA. R.S. 37:1378 (A) (2), which states that the Plumbing Board may revoke, suspend, or refuse to renew a natural gas fitter or master gas fitter license or both, of any person who falsifies any material portion of that person's application for a license to the Board.
- 3.) Undersigned applicant hereby states that he/she was employed by the following employer in the periods so stated, performing natural gas work as described :

CURRENT EMPLOYER:				
COMPANY NAME _____		PHONE NO. _____		
ADDRESS _____				
STREET	CITY	STATE	ZIP CODE	
EMPLOYMENT: FROM _____		TO _____		
MONTH	YEAR	MONTH	YEAR	
DESCRIPTION OF NATURAL GAS WORK:				

SUPERVISOR NAME _____		SUPERVISOR SIGNATURE _____		

Signature _____
APPLICANT'S NAME

SWORN TO AND SUBSCRIBED BEFORE THE UNDERSIGNED NOTARY PUBLIC,

THIS _____ DAY OF _____ 20 _____

**NOTARY
SEAL**
