



## Sheet Metal Systems Technician

When completed mail to:

**Department of Licenses and Inspections**  
C&I Fire Unit  
990 Spring Garden St., 3<sup>rd</sup> Floor  
Philadelphia, PA 19123

Use a single check or money order for all fees payable to “**City of Philadelphia**”

1. Name of Applicant	2. Social Security Number	3. Home Telephone Number (include area code)	
4. Home Address (no P.O. Boxes)	City	State	Zip Code
5. Billing Address (if different than Home Address) (no P.O. Boxes)	City	State	Zip Code

### 6. Requirements for Approval

This application shall be accompanied by the following:

1. Proof of compliance with one of the following conditions:
  - A. **Grandfather Option** - Performed at least 10,000 hours of documented full-time experience working on sheet metal systems or has completed a registered Sheet Metal Technician Apprenticeship Program You must attach supporting documentation. This “grandfather” option expires at midnight December 5, 2006;
  - OR -
  - B. **Training & Examination** - Proof of completion of a registered Sheet Metal Systems Technician Apprentice Program **AND** pass an examination designated by the Department of Licenses & Inspections;
  - OR -
  - C. **Reciprocity** - A copy of your Sheet Metal Systems Technician certificate from a jurisdiction with a reciprocity agreement with the City of Philadelphia.
2. Payment of a non-refundable application fee of \$150.

**Note:** Documentation shall be by CERTIFIED letter(s) from the employer(s); **OR**, by CERTIFIED pension statements signed by the program administrator(s); **OR**, by CERTIFIED documents from the administrator of a registered apprenticeship program. For the purposes of this application a registered Sheet Metal Systems Technician Apprenticeship Program is one that is registered with federal or state government and requires at least 8,000 hours job experience and 800 classroom or shop instruction in the sheet metal trade.

7. License Type (OFFICE USE ONLY)	Fee	Revenue Code	Expiration Date	License Number
<input type="checkbox"/> Sheet Metal Systems Technician	\$150.00	TBD	03/31/	

### 8. Applicant Certification

*The information regarding qualifications required in block #6 must be verified by the applicant’s signature. Alternatively, the qualification information may be verified by a third party such as an apprenticeship or pension program administrator or the applicant’s employer.*

*I hereby certify that the statements contained herein are true and correct and I understand that if I knowingly make any false statement herein I am subject to the possible revocation of any certificates issued as a result of my false application, and such other penalties as may be prescribed by law.*

Applicant’s Signature \_\_\_\_\_

Date \_\_\_\_\_

**FOR OFFICE USE ONLY**

PREREQUISITES (LIST THOSE CHECKED DURING PROCESSING)

REMARKS:

**APPROVED**

**REFUSED**

Reviewed By

Number