

**CITY OF LOS ANGELES
DEPARTMENT OF BUILDING AND SAFETY
LICENSE SECTION
221 N. Figueroa Street, #700
(213) 482-0099
www.ladbs.org**

**EXAMINATION INFORMATION
JOURNEY- LEVEL PLUMBER**

DUTIES

Install, repair, alter, add to or service any plumbing.

REQUIREMENTS

At least four years of experience as a Journey-level Plumber, or four years experience as an apprentice or helper. Verification of experience shown on application will be required.

A completed and signed "Journey-Level Plumber Certification of Work Experience". Applicant will fill out Part 1 and Employer will fill out Part 2.

Please provide ONE current (2"x 2") FULL-FACE PASSPORT SIZE PHOTOGRAPH with application.

FILING FEE: \$54.50

RENEWAL FEE: \$27.50

EXAMINATION:

SCHEDULE & LOCATION:

Applicants will be notified of examination date by phone or email.

TIME:

Applicants will be notified of their scheduled exam time by phone or email.

SCOPE:

The examination consists of multiple choice questions. These questions relate to the 2020 Los Angeles Plumbing Code, general plumbing knowledge and trade practice. The use of textbooks, notes, conversations or help from others taking the examination is not allowed. A calculator is recommended.

Effective January 2022, you must have the following code:

2020 Los Angeles City Plumbing Code (and the Los Angeles City Amendments)

A valid government-issued photo identification card with a signature (such as driver's license, military I.D., or passport) will be required when applicants appear for the examination.

CELL PHONES ARE NOT ALLOWED DURING THE EXAMINATION, NO EXCEPTIONS.

MINIMUM

SCORE:

Applicant must score a minimum of 70% on each section.
(Section 1) Questions 1 – 25
(Section 2) Questions 26 – 100

TIME LIMIT

Failure to appear for the examination within 6 months after filing the application will void the application. Applicants must then file a new application and pay the required filing fee before another examination will be given.

RE-EXAMINATION

Applicants who fail to pass the examination are required to file a new application and a filing fee. Applicants are eligible to take additional examinations in 4-week intervals. Applicants who fail to pass the third examination are required by ordinance to wait 6 months thereafter.

RENEWAL

The Journey-level Plumber license will expire three years from date of issuance, but may be renewed within 30 days after the expiration date or within 12 months by payment of an additional 10% of the renewal fee for each month after the first.

RECIPROCAL LICENSES:

Fill out the application completely. On the line "**TITLE OF EXAMINATION**" print "**JOURNEY-LEVEL PLUMBER-RECIPROCAL**". Applicant must provide in person one of the following current licenses:

- 1. N.I.T.C. License (formerly P.I.P.E.)**
- 2. P.H.C.C. License**
- 3. County of Los Angeles Plumbing License**
(Original licenses only, no photocopies accepted)

Filing Fee: \$54.50

Please provide ONE current (2"x 2") FULL-FACE PASSPORT SIZE PHOTOGRAPH with application.

Codes books may be purchased at the following locations:

ICC (International Code Council)
(www.iccsafe.org)
5360 Workman Mill Road
Whittier, CA 90601
(800) 284-4406

IAPMO (International Association of Plumbing and Mechanical Officials)
(www.iapmo.org)
4755 E. Philadelphia Street
Ontario, CA 91761-2816
(909) 472-4100

Building News, Inc.
(www.bnibooks.com)
990 Park Center Drive, Suite E
Vista, CA 92081-8352
(760) 734-1113

Builders Book Store
(www.buildersbook.com)
8001 Canoga Avenue
Canoga Park, CA 91304
(818) 887-7828 / (800) 273-7375



TRADE LICENSE APPLICATION

221 N. Figueroa St., Suite 700
 Los Angeles, CA 90012
 (213) 482-0099

Examination Title: Date:

Applicant Name: Birth Date:

Address:

Address City State Zip

Email: Phone:

Height: Weight: Eyes: Hair:

Employer/Education – Name and Address <small>* Only show experience needed to qualify for examination</small>	Duties Related to Examination	Dates	Total Time
		From: To:	YEARS/MOS
		From: To:	YEARS/MOS
		From: To:	YEARS/MOS
		From: To:	YEARS/MOS
		From: To:	YEARS/MOS

I hereby certify that all of the information that I have given herein is true and complete to the best of my knowledge and belief. I understand that any false statement will subject me to disqualification.

Applicant's Full Signature

FOR OFFICE USE ONLY:

EXAM NUMBER	EXAM STATUS		
	Exam Date		
	Oral		
LICENSE NUMBER	Written		
	Final		
	Initial		

FEES		2nd Fees (if applicable)
Approved for Exam By	<input type="text"/>	
Filing Fee	<input type="text"/>	
D.S.C Surcharge	<input type="text"/>	
System Surcharge	<input type="text"/>	
Total Fees Due	<input type="text"/>	

For Cashier's Use Only

As a covered entity under Title II of the Americans with Disabilities Act, the City of Los Angeles does not discriminate on the basis of disability and, upon request, will provide reasonable accommodation to ensure equal access to its programs, services and activities



Journey-Level Plumber Certification of Work Experience

INSTRUCTIONS:

The applicant shall complete the information in Part 1 below, then the person certifying the work experience (**business owner or manager**) shall complete Part 2. The Los Angeles Department of Building and Safety reserves the right to contact the certifier to verify work experience and/or dates. If additional space is needed to list the experience, please attach a separate sheet that must also be signed under the same certification statement contained below.

Use a separate form for each employer. **Please type or print neatly and legibly in black or dark blue ink—pencil is not acceptable.** Forms containing strikeouts or modifications may not be accepted. Corrections must be initialed by the certifier.

PART 1- APPLICANT INFORMATION		
The <u>Applicant</u> must complete Part 1 <u>before</u> the certifier completes Part 2		
<u>Name</u>		
First:	Last:	Middle:
New Application	Renewal Application	License #

PART 2- WORK EXPERIENCE AND CERTIFICATION STATEMENT			
The <u>Certifier</u> must complete Part 2 <u>after</u> the applicant completes Part 1			
Employer:			
License #:	Self-employed:	Yes	No
<u>Employer's street address</u>			
Number/Street:	City:	State:	ZIP:
<u>Name of Certifier</u>	<u>Telephone # of Certifier</u>	<u>Certifier email address</u>	
Certifiers job title:			
Applicants job title:			
DATES (List only dates that the applicant was engaged in work related to the type of examination indicated in Part 1)			
From	To	<i>Equals</i> Years	Months
In the space below, list all specific trade duties the applicant performed that were related to the examination listed in Part 1. (do not list specific project names)			
I Certify that I have direct knowledge of the work covering the time period outlined above. I certify under penalty of perjury, under the laws of the State of California, that the information stated above is true and correct.			
Date:	Signature:	Printed Name:	