

SOUTH DAKOTA DEPARTMENT OF LABOR AND REGULATION  
**SOUTH DAKOTA PLUMBING COMMISSION**

217 W. Missouri Ave., Pierre, SD 57501  
Tel: 605.773.3429 dlr.sd.gov/plumbing

**PLUMBING EXPERIENCE VERIFICATION FORM**

**Applicant name:** \_\_\_\_\_ **DOB:** \_\_\_\_\_ **City, State:** \_\_\_\_\_  
is collecting hours to prepare for the (select one: Journeyman/Plumbing Contractor) Exam.

To verify his/her work experience as a plumber, **PLEASE FILL IN THE INFORMATION BELOW AND RETURN TO THE ABOVE ADDRESS IN A TIMELY MANNER. PLEASE TAKE THE TIME TO FILL IN ALL SPACES TO ASSURE TIMELY PROCESSING OF APPLICATIONS.**

The experience on this form should be listed in hours; 1,900 hours equals one year of experience. List only the (Apprentice/Plumber) hours the above individual has worked for you. (3,800 hours required for 3<sup>rd</sup> yr. apprentice test; 7,600 hours required for plumber test, at least 3800 hours as Plumber to test for Plumbing Contractor.)

**Company name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

Type of Experience	Number of Hours
Residential Plumbing	_____
Commercial & Industrial Plumbing	_____
Farmstead Plumbing	_____
Plumbing Maintenance & Repair	_____
Sewer and Water Installations	_____
Appliance Installation	_____
Water Cond't. Installation	_____
Planning & laying out for	_____
Mobile Home Plumbing Work	_____

Plumbing Experience listed above was between \_\_\_\_\_ and \_\_\_\_\_  
**(Dates must be month, date, and year)**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

(Must be signed by a Plumbing Contractor)

**Plumbing Contractors License #:** \_\_\_\_\_

**State:** \_\_\_\_\_ **Daytime phone #:** \_\_\_\_\_