

ALABAMA PLUMBERS AND GAS FITTERS EXAMINING BOARD
216 AQUARIUS DR., SUITE 319
HOMEWOOD, AL 35209
PHONE: 205-945-4857
FAX: 205-945-9915
WWW.PGFB.ALABAMA.GOV

Waiver of Annual Fees / Penalties

NOTE: Please print or type and provide all requested information. A home address MUST be provided even if you receive your mail at a different address.

Name: _____ Social Security #: XXX-XX-_____

Home Address: _____ County: _____

City: _____ State: _____ Zip Code: _____

Mailing Address: _____ County: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ E-mail: _____

I am requesting fees/penalties to be waived on the below certification(s) by the Alabama Plumbers & Gas Fitters Examining Board as a:

- | | |
|--|--|
| <input type="checkbox"/> Master Plumber/Gas Fitter | |
| <input type="checkbox"/> Master Plumber | <input type="checkbox"/> Master Gas Fitter |
| <input type="checkbox"/> Journeyman Plumber/Gas Fitter | |
| <input type="checkbox"/> Journeyman Plumber | <input type="checkbox"/> Journeyman Gas Fitter |
| <input type="checkbox"/> Apprentice | |

I certify that I was not actively engaged in the plumbing and/or gas fitting business in the State of Alabama during the years of _____ through _____, and hereby apply for the waiver of annual active status fees/penalties for this period. Please submit proof of other employment (including W-2 Forms, tax returns, etc.), or proof of disability (including a doctor's statement or other medical record confirming disability during that period).

No waiver of annual fees/penalties will be granted to anyone found working as a plumber and/or gas fitter without current certification.

Signature: _____

Please have this form notarized:

Sworn and subscribed to before me this _____ day of _____, 20_____.

Notary Public

My Commission Expires