

ALABAMA PLUMBERS AND GAS FITTERS EXAMINING BOARD
216 AQUARIUS DR., SUITE 319
HOMEWOOD, AL 35209
PHONE: 205-945-4857
FAX: 205-945-0273
WWW.PGFB.ALABAMA.GOV

Request for verification of Alabama license/registration

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-_____

Mailing Address: _____ County: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ E-mail: _____

I am currently certified by the Alabama Plumbers & Gas Fitters Examining Board as a:

- Master Plumber/Gas Fitter – MPG # _____
 Master Plumber – MP # _____ Master Gas Fitter – MG # _____
 Journeyman Plumber/Gas Fitter – JPG # _____
 Journeyman Plumber – JP # _____ Journeyman Gas Fitter – JG # _____
 Apprentice – APP # _____

I would like this information provided to: _____

I would like this information provided by:

_____ Mail: _____

_____ E-mail: _____

_____ Fax: _____

Our verification letters include the following information:

- Licensee name
- Type of license & license number
- Method obtained by (examination, reciprocity, etc.)
- License status, issue dates, and expiration date
- Exam history & scores
- Public Board orders (disciplinary history)

If you need additional information provided, please specify: _____

By my signature below, I certify that I am authorizing the State of Alabama Plumbers & Gas Fitters Examining Board to release the requested information to the entity requested. I also acknowledge that I am subject to a non-refundable fee of fifteen dollars (\$15) for this records request. Any additional records or amendments due to request not being complete will be considered a new verification request and subject to an additional fifteen dollar (\$15) non-refundable fee. Payment is attached in the form of credit card authorization form, e-check authorization form, check, or money order.

Signature: _____