



MONTANA BOILER OPERATOR PROGRAM
301 S PARK AVENUE
PO BOX 200513
HELENA, MT 59620-0513
PHONE:(406) 444-6880 FAX: (406) 841-2305
EMAIL: dlibsddhelp@mt.gov
WEBSITE: boileroperator.mt.gov

BOILER APPLICATION FOR RE-EXAMINATION

Please complete this application and return it with the appropriate fee as indicated. Make a check or money order payable to the Montana Boiler Operator Licensing Program. **NOTE:** Please do not send cash.

Pursuant to Section 50-74-311, MCA, you must wait 45 days from the date you took your last exam before you can sit for the exam again.

Name: _____
First Name _____ Last Name _____

Mailing Address: _____
Street/PO Box _____ City _____ State _____ Zip _____

Phone: _____ Email: _____

Please indicate which exam you wish to retake and submit the applicable fee with this application. **Note:** Exam fees are non-refundable.

The re-exam fee for all classes of licensure is \$35.00.

Please indicate the Job Service location where you prefer to take the exam:

Applicant Signature

Date

EMPLOYMENT STANDARDS DIVISION

Blaster, Boiler, Crane, Elevator, and Fire Protection License Programs
301 S Park Ave - PO Box 200513 - Helena, MT 59620-0513 - (406) 444-6880 - dlibsddhelp@mt.gov