## Board of Plumbers 301 South Park PO Box 200513 Helena MT 59620-0513 (406) 444-6880

## RENEWAL APPLICATION

License No

Check For New Name or Address. Indicate any changes below.

| Name    |       |          |
|---------|-------|----------|
| Address |       |          |
| City    | State | Zip Code |
| Country | Email |          |

## MEDICAL GAS RENEWAL APPLICATION

RENEWAL FEE \$30.00 Late Renewal Postmarked After September 1 \$60.00

Your Montana Medical Gas Endorsement will expire on September 1

Incomplete or unsigned renewal applications will not be processed and will be returned. It is unlawful for a person who refuses or fails to pay the renewal fee to install Medical Gas in this state.

- 1) Answer the disciplinary question at the bottom of the form.
- 2) Sign the renewal application.
- 3) Attach a copy of your current Medical Gas Piping Certification
- 4) Submit a check or money order for the amount indicated above, made payable to the Board of Plumbers Do not send cash.
- 5) If the renewal is postmarked after September 1, the license will be in a lapsed status for 45 days. After the 45 days, the license will expire and the licensee is considered to be practicing without a license. The license can be reactivated for up to 2 years following the date of renewal, but all renewal and late fees are to be paid.

HAVE ANY LEGAL OR DISCIPLINARY ACTIONS BEEN INSTITUTED AGAINST YOU OR ANY OF YOUR PROFESSIONAL LICENSES SINCE EITHER YOUR INITIAL LICENSURE IN MONTANA OR SINCE YOU RENEWED YOUR LICENSE, WHICHEVER OCCURRED LATEST?

**Yes** If so, please attach copies of the document that initiated each action and all final orders. Mont. Code Ann. Sec 37-1-105 requires that you report this information. Failure to accurately furnish the information is grounds for denial or revocation of your license.

No

I hereby declare under penalty of perjury the information included in my renewal to be true and complete to the best of my knowledge.

| Your signature:_ |                  | Date: |
|------------------|------------------|-------|
| · ·              | DO NOT SEND CASH |       |