



STATE OF MAINE
 WATER WELL DRILLING COMMISSION
 286 WATER STREET, 3rd FLOOR
 AUGUSTA MAINE 04333-0011

Jessica Bishop, Clerk
 (207) 287-5699 (voice)
 (207) 287-4172 (fax)

MASTER PUMP INSTALLERS EXAMINATION APPLICATION

In accordance with 32 MRSA §4700-I sub-§§2.A the Maine Well Drillers Commission shall review this application to take the Master Pump Installers written examination to determine that the applicant has been engaged in the trade as a Maine licensed Journeyman Pump Installer under the direct supervision of a licensed Master Pump Installer for at least three (3) years and has had at least an average of one thousand (1,000) hours of experience in each of those three years. This application will be accepted and reviewed upon confirmation by the Commission clerk that it is complete. A complete application consists of the following:

Check List:

- A completed, **signed** application form.
- A completed work history form that clearly demonstrates the required experience and identifies the licensed Master Pump Installer(s) that supervised the applicant's work for the three years required.
- A minimum of three (3) completed references using the attached reference forms, **one (1) reference must be from a licensed Master Pump Installer**. References must be completed by the person providing the reference, signed and dated. No photo copies will be accepted.
- Copies of any installers licenses held either in Maine or from out of state.
- Copies of licenses held by persons completing references both from Maine or out of state.

Applications lacking any of the above if applicable will be returned.

Personal Information

Name: _____

Address: _____ Town: _____ State/Zip: _____

Telephone: (home) _____ (business) _____

E-Mail: _____ Date of Birth: _____

Journeyman License Number: _____ Date 1st Received: _____ Date Expires: _____

Out of State License Number: _____ State of Issue: _____ Date Received: _____ Date Expires: _____

Application Review and Examination fee \$25.00. Please make check payable to "State Treasurer" and submit with completed application to:

Maine Well Drillers Commission
 Division of Environmental Health
 286 Water Street 3rd Floor
 Augusta, Maine 04333-0011

Note: Exam questions are taken from the Water Systems Handbook, 12th edition, published by the Water Systems Council and the Well Drillers and Pump Installers Rules, 144A CMR 232. This book can be purchased through the Water Systems Council at www.watersystemscouncil.org. It may also be available at local or university libraries.

Work History (Required)

Instructions for completing the work history section: This section will be used to demonstrate that the required work experience has been completed. All of the positions held by the applicant that are being used to satisfy the experience requirement must be included in the work history section. Enough information must be provided for each position held to allow the Commission to confirm that the applicant has worked at least an average of 350 hours for at least 3 years as a Journeyman Pump Installer under the direct supervision of a Master Pump Installer or as an installer from an out of state firm. Please be specific and be sure that this work history is confirmed by your references.

Employer #1	Employer #2 (if required)	Employer #3 (if required)
Name: _____	Name: _____	Name: _____
Address: _____	Address: _____	Address: _____
Master Installer: _____ Pump Installers License Number: _____	Master Installer: _____ Pump Installers License Number: _____	Master Installer: _____ Pump Installers License Number: _____
Phone #: _____	Phone #: _____	Phone #: _____
Dates Employed Installing Pumps: From _____ To _____	Dates Employed Installing Pumps: From _____ To _____	Dates Employed Installing Pumps: From _____ To _____
Position/Duties: _____	Position/Duties: _____	Position/Duties: _____

I hereby certify that, to my knowledge, the information on this form and attachments is true and accurate. **Maine law makes it illegal for persons applying for a Departmental license to make false statements upon an application with the intent to deceive department officials in the course of their official duties, or to create a false impression in a written application for pecuniary or other benefit. Unsworn Falsification is a Class D misdemeanor offense punishable by up to 364 days incarceration, a fine of up to \$2,000, or both.**

Signature: _____ Date: _____

Printed Name: _____



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Name:	Name:	Name:
Address:	Address:	Address:
Master Installer: _____ Pump Installers License Number: _____	Master Installer: _____ Pump Installers License Number: _____	Master Installer: _____ Pump Installers License Number: _____
Phone #:	Phone #:	Phone #:
Dates Employed Installing Pumps: From _____ To _____	Dates Employed Installing Pumps: From _____ To _____	Dates Employed Installing Pumps: From _____ To _____
Position/Duties:	Position/Duties:	Position/Duties:

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Signature: _____ Date: _____

Printed Name: _____