

APPRENTICE PLUMBER'S LICENCE REGISTRATION FORM

Please <u>answer all</u> the following questions. Each registration form shall be accompanied by a cover letter from the applicants' employer including the Supervisors name and Licence number along with the appropriate fee. The applicants' employer must hold a valid Cayman Islands Journeyman or Master Plumber's Licence. The completed form should be returned to the Department of Planning at 133 Elgin Avenue, PO Box 113, KY1-9000, George Town, Grand Cayman. CAYMAN ISLANDS

Name of Applicant:				
Mailing Address PO Box #: _		Postal Cod	le:	
Telephone #:	(H)	(W)		(C)
Private Firm □	Government []		
State Employer name & addre	ss & name of su	pervisor:		
School Qualifications gained:				
Trade Qualifications gained:				
Nationality: Non-Caymanians please provide pro-	oof of a current work	c permit - Caymania	ns please provide pr	roof of citizenshin
Application Date:	S	ignature:		
* FOR OFFICIAL USE ON Registration Fee \$20.00	LY *		ID#·	