

AREA II PLUMBERS JOINT APPRENTICESHIP & TRAINING COMMITTEE
JOURNEYMAN/APPRENTICE RATIO VERIFICATION FORM

Date: _____, _____

THIS FORM FOR REGISTERING A NEW APPRENTICE

Name of Plumbing Contractor _____

Address _____

State Plumbing Contractor License Number _____

It is hereby certified that the following Oregon State Licensed Journeyman Plumber(s) and Apprenticeship & Training Division Registered Plumber Apprentice (**COMPLETE THE REVERSE SIDE OF THIS FORM**) are employed by this firm on this date, and further that the listed journeymen are regarded as permanent employees who are expected to be continuously employed during the following six months, save and except for conditions or circumstances not at this foreseeable time. I hereby agree to notify the Area II Plumbers Joint & Apprenticeship & Training Committee in writing immediately upon termination of the employment of any listed journeyman.

Signature of Owner _____ Date _____

APPRENTICES:

| NAME | AGREEMENT NUMBER | PERIOD OF APPRENTICESHIP | COMMITTEE OF REGISTRATION (Area I, Area II, etc.) |
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Return this completed (front & back) form to:
Via Mail: Area II Plumbers J.A.T.C.
2475 Lancaster Dr NE
Bldg B, Suite 9
PO BOX 7106, Salem OR 97303

