



CITY OF TALLAHASSEE
“COMPETENCY CERTIFICATE APPLICATION CHECK-LIST”
BY EXAM

_____ Completed & Notarized City of Tallahassee Application for Competency Certificate

_____ Completed & Notarized Affidavit(s) for Trade Experience Verification
(note: to be completed & signed by current and/or previous employers to verify work experience)

_____ EPay: ACH Check or Credit Card (VISA, MC, AMEX, DISC) for \$233.16 non-refundable application fee (absolutely no cash can be accepted)

_____ Return completed packet to Growth Management/City Building Inspection Division
Mailing Address: 300 South Adams Street Box B-28, Tallahassee, FL 32301-1731 or via
Email: GrwthMgtSvcCtr@Talgov.com

CITY OF TALLAHASSEE LAND DEVELOPMENT CODE
CHAPTER 3

Article V., Division 2. - Certification is amended as follows:

Sec. 3-232. Application.

- (a) No new master or contractor certificate of competency shall be issued by the building official.
- (b) To obtain a certificate of competency as a journeyman in the city, an applicant shall submit an application in writing to the building official, on forms approved by the building official, requesting to be examined in the category desired.
- (c) Any application for a journeyman certificate of competency in mechanical, plumbing, electrical or as a gas fitter may be approved by the building official upon satisfaction of the requirements of this chapter.

Sec. 3-233. - Required experience and examination.

- (a) An applicant shall be entitled to take the examination for the purpose of determining whether the applicant is qualified to work as a journeyman if the applicant can show the required number of years experience in the appropriate field under the direct employ of a contractor licensed in the appropriate field. The building official may accept credits for accredited college-level courses in the appropriate field for up to one-fourth of the years of experience required. All junior college or community college-level courses shall be considered accredited college-level courses. Two years of education in the appropriate field at an accredited vocational school may be substituted for one year of practical experience.
- (b) Examinations shall be prepared, administered and graded by an independent testing firm selected by the building official and shall be at dates, times and locations selected and announced by that firm.
- (c) Special examinations may be administered by that firm's policies with the approval of the building official.
- (d) A passing grade on the examination shall be as required for the category of work for which a certificate is sought as herein provided above, except that the building official may reduce the passing grade for the journeyman categories by one point per year, up to a maximum reduction of ten points based on all of the following criteria:
 - (1) The applicant must have taken the required exam at least once after the effective date of Ordinance No. 99-0-0002 (October 1, 1999).
 - (2) The applicant must provide proof of at least one year of practical experience in the trade in which they are seeking certification for each point of grade reduction. Proof shall be in the form of a notarized affidavit from a licensed contractor under which the experience was gained. All practical experience

used to grant points for the reduction of the passing grade must have been submitted as part of the application. The applicant will be notified of the points granted upon approval of the application for exam.

- (3) All practical experience must have been obtained while in the employ of a licensed contractor licensed in the trade for which the certification is being sought.
- (4) Only practical experience obtained beyond the minimum years experience for taking the exam may be used for reducing the required passing grade.
- (5) A certificate of competency as a journeyman obtained using experience points cannot be used to qualify an individual to take the masters exam. To take the masters exam within a trade, the applicant must have scored a minimum of 70 on the required journeyman exam.

Work Experience Requirements & Passing Score Requirements
(work experience must be under the supervision of a licensed contractor)

Specialty	Level	Required Experience	Minimum Test Score
Plumbing	Journeyman	Four (4) Years in the Field of Plumbing	70
Electrical	Journeyman	Four (4) Years in the Field of Electricity	70
Gas (natural)	Journeyman	One (1) Year in the field of Gas	70
Mechanical (Air Conditioning)	Journeyman	Four (4) Years in the Field of Air Conditioning	70

The City of Tallahassee charges a \$233.16 processing fee for the exam. Payment can be made in the form of EPay: ACH Check or Credit Card (VISA, MC, AMEX, DISC) for \$233.16 non-refundable application fee (absolutely no cash can be accepted)

Prov Charges an examination fee of \$80.00 that must be submitted along with your test registration to **Prov**

**If you have any questions, please contact our office at (850) 891-7001 opt. 2, then opt. 4

Any questions for **Prov call 1-866-720-7768 or visit their website www.Provexam.com

City of Tallahassee
Application for Competency Certificate
Growth Management Department/Building Inspection Division
Mailing Address: 300 S. Adams Street, City Hall Box B-28, Tallahassee, FL. 32301
Physical Address: 408 N. Adams Street, Tallahassee, FL. 32301

Journeyman Plumber Journeyman Electrician Journeyman Gas Fitter Journeyman Air Conditioning

A non-refundable processing fee of \$233.16 is due upon receipt of application

Complete the Following Information:

Name: _____ Date Of Birth _____ / _____ / _____

Residence Address: _____ City/State/Zip _____

Home Telephone #: _____ Work Telephone #: _____ Fax Telephone #: _____

Answer the Following Questions: “If this application is falsified in any manner, the Building Official may reject it. Further, if additional investigation after acceptance of this application indicates falsification, then your Certificate of Competency may be revoked.”

1. Have you ever been denied a Certificate of Competency by any Board of Examiners? _____

If yes, please explain: _____

2. Have you ever had a Certificate of Competency revoked by any Board of examiners? _____

If yes, please explain: _____

3. List the jurisdictions in which you presently hold a Certificate of Competency.(If you currently hold a State Registrations, indicate below)

Work History

Name of Firm Where Presently Employed

Business Address

Employer License Number

Position

Date Started

List of Previous Employment: "List name and address of employer and your job title. Please note that work experience must have been under the supervision of a licensed contractor in order to count towards eligibility to take the exam. In addition, you will need to provide an affidavit from your listed employers, including your present employer verifying employment dates and duties performed."

Name & Address of Previous Employer

Dates Employed

____ Years ____ Months
From: _____ To: _____

____ Years ____ Months
From: _____ To: _____

____ Years ____ Months
From: _____ To: _____

____ Years ____ Months
From: _____ To: _____

____ Years ____ Months
From: _____ To: _____

I attest that the information herein is provided in good faith and is true and correct to the best of my knowledge and belief. If the information is shown to be inaccurate for any reason, I understand that any action taken by the Building Official in reliance on the inaccurate information may be rescinded.

I, _____ (Please Print) being first duly sworn and attested say that all statements in this application are honest and true to the best of my knowledge and belief.

Signature _____ Date _____

The foregoing instrument was acknowledged before me by _____

who is personally known to me _____ or who has produced _____ as identification and who did not take any oath.

Witness my hand and officially seal this _____ day of _____, A.D. 20____

Notary Public State of Florida at Large

My Commission Expires: _____

(seal)

**AFFIDAVIT
FOR
TRADE EXPERIENCE VERIFICATION**

APPLICANT NAME _____ SS#: _____
(PRINT OR TYPE FULL NAME)

NAME OF EMPLOYER _____

LICENSING AGENT'S NAME _____ LICENSE # _____

ADDRESS _____ CITY _____ ST _____

PHONE # _____ CONTACT PERSON _____

LENGTH OF EMPLOYMENT FROM _____ TO _____
 _____ YEARS _____ MONTHS

DESCRIPTION OF DUTIES:

LENGTH OF TIME AS A FOREMAN Required for Master Applicants: _____ YEARS _____ MONTHS

I attest that the information herein is provided in good faith and is true and correct to the best of my knowledge and belief. If the information is shown to be inaccurate for any reason, I understand that any action taken by the Tallahassee Construction Industry Review Committee in reliance on the inaccurate information may be rescinded.

LICENSING AGENT'S SIGNATURE

PRINT NAME AND TITLE

State of Florida, County of Leon

The foregoing instrument was acknowledged before me by _____ who is personally known to me or who has produced _____, as identification and who did not take an oath.

WITNESS my hand and official seal this _____ day of _____ A.D., 20____.

 Notary Public

My Commission Expires: