



**State Board of Examiners of Plumbing,
Heating and Fire Sprinkler Contractors**

1109 Dresser Court, Raleigh, NC 27609

Phone: 919-875-3612

information@nclicensing.org

www.nclicensing.org

Request for Register of Licenses

Name: _____

Company Name (if applicable): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

**Email Address: _____

I, _____, am hereby requesting a register of current licensees of the Board. I am enclosing a check or money order for \$15.00. I understand the register will come in electronic form to my email.

Please choose only one of the following:

____ I would like the register to include all classifications of active licenses.

____ I would like the register to include the list for currently approved applicants (this will provide one week of applicants.)

____ I would like the register to include only the selected classifications of active licenses as designated below:

____ Plumbing Class I

____ Plumbing Class II

____ Heating Group 1 Class I

____ Heating Group 1 Class II

____ Heating Group 2

____ Heating Group 3 Class I

____ Heating Group 3 Class II

____ Limited Restricted Plumbing Contractor

____ Fire Sprinkler Inspection Contractor

____ Fire Sprinkler Installation Contractor

____ Fuel Piping

____ Residential Fire Sprinkler Contractor

____ Residential Fire Sprinkler Design Contractor

I would like the list to be emailed in this format ____ Adobe PDF ____ Excel

Enclose a check or money order payable to the "State Board of Examiners" and mail to the address above.

Please allow 3-5 business days after receipt for processing.