

**State Board of Examiners of Plumbing,  
Heating & Fire Sprinkler Contractors**  
1109 Dresser Court, Raleigh, NC 27609  
(919) 875-3612

**Request for Verification of License**

Name of Licensee: \_\_\_\_\_ License # \_\_\_\_\_

Company Name (if applicable) \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

I, \_\_\_\_\_, am hereby requesting verification of the license listed above. I am enclosing a check or money order for \$25.00, as required by Title 21, Chapter 50, Section .1104 of the North Carolina Administrative Code.

**Please choose only one of the following:**

\_\_\_\_\_ I would like the letter of verification mailed to me at the above address.

\_\_\_\_\_ I would like the letter of verification mailed to the following person/organization/address:

Mail to: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Enclose a check or money order for \$25.00 payable to "State Board of Examiners", and mail to:

State Board of Examiners of Plumbing,  
Heating & Fire Sprinkler Contractors  
1109 Dresser Ct.  
Raleigh, NC 27609

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