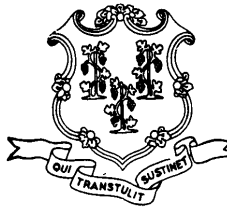


STATE OF CONNECTICUT
DEPARTMENT OF CONSUMER PROTECTION
 License Services Division
 450 Columbus Blvd, Ste 801
 Hartford, CT 06103
 Email: dcp.occpro@ct.gov



Occupational Trade Journeyman License Reapplication

This application is for individuals who have previously been approved for an exam and are reapplying for another year of exam eligibility, OR if you held a Connecticut license that has been expired for more than three (3) years and you are reapplying to take the exam.

Please select one of the following:

- ☐ I am applying for another year of exam eligibility.
- ☐ I held a Connecticut license that has been expired for more than three (3) years and reapplying to take the exam.

1. All sections on this application must be completed and the application must be signed.
2. A check and/or money order in the amount of **\$90.00 made payable to "Treasurer, State of Connecticut"** must accompany this application. Application fees are non-refundable.
3. You do not need to submit documentation or provide proof of the requirements for the license type, as your qualifying documents were previously reviewed and approved with your initial application.
4. Please note, if you have previously held a Connecticut journeyman license for two (2) years or more, you may be eligible to apply for a contractor license. For more information on the scope of work, license types and to apply, please visit our website at www.ct.gov/dcp. Do not use this application to apply for a contractor license.
5. Mail your completed application and fee to the above address.

Applicant Information:

First Name, Middle Initial, Last Name

License Type Applying For:

If you have previously held a CT license, indicate your license number:

Residence Street Address

City or Town

State

Zip Code

Telephone Number

Email Address

Social Security Number

Date of Birth

Mailing Address (if different from above)

City or Town

State

Zip Code

1). Have you ever been convicted of a felony crime? ☐ Yes ☐ No If yes, attach a completed Criminal Conviction Worksheet. You can download the worksheet on our website at www.ct.gov/dcp.

Attestation:

I attest under the penalties of the Connecticut General Statutes, Section 53a-157b, that the information provided in this application is the truth to the best of my knowledge.

 Signature of Applicant

 Date