MECHANICAL RECIPROCATION APPLICATION

City of Elkhart, Indiana
Address: 229 S. 2nd Street, Elkhart, IN 46516
Ph. 574-294-5471 www.elkhartindiana.org

Requesting the following classifications: □ Class A HVAC □ Class AA Hydronic □ Class AAA Refrigeration

NAME: _____ LAST 4 DIGIST OF SSN: _____
LAST FIRST MI

HOME ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

CELL PHONE: _____ E-MAIL: _____

COMPANY NAME: _____

COMPANY ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

WORK PHONE: _____ E-MAIL: _____

TRADE SCHOOL/COLLEGE: _____ YEAR: _____

YEARS EXPERIENCE AS: Apprentice: _____ Journeyman: _____ Contractor: _____

Have you ever held an mechanical license in this or any other city, county or state? If yes, provide place and dates:
_____

Have you ever been refused or had an mechanical license revoked? If yes, where and when?
_____

Please list the last 3 places of employment, dates and type of duties.
1. _____
2. _____
3. _____

Please provide 2 references (other than employers)
1. _____ Address: _____
2. _____ Address: _____

***A non-refundable Reciprocation Application fee of $100.00 must accompany this form.**
***An Mechanical License Application must also be submitted. If you are obtaining a license with the City of Elkhart for the first time, then both applications must be submitted in person with a valid photo ID.**

I hereby certify that all the information I have given is true and correct to the best of my knowledge. **VIOLATORS** are subject to the penalties as specified in the Elkhart City Code 157. Penalties include fines, court costs and license suspension or revocation.

Signed: _____ Date: _____

Accepted By: _____ Date: _____