



DEPARTMENT OF PUBLIC SAFETY
DIVISION OF FIRE SAFETY

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ELEVATOR MECHANIC I

APPLICATION FOR LICENSE

NOTE: Failure to provide adequate documentation of experience/work history, continuing education and proof of appropriate insurance coverage may result in denial or delay in issuance of this license/renewal.

Type of Application: ____ **Initial License** ____ **Renewal**

APPLICANT INFORMATION

PLEASE TYPE OR PRINT

Name of Applicant:		Home Phone Number:
Home Address:		Cell Phone Number:
City:	State:	Zip:
Email Address:		

EXPERIENCE/ EDUCATION

Applicant shall provide documentation of one of the following along with this application for the initial Mechanic I License:

- 1) A certificate of completion documentation the applicant has successfully passed the mechanic's examination of a nationally recognized training program for the elevator industry. (The applicant must make application for initial licensure within one (1) year of the effective date of the rule); or
- 2) A certificate of completion of an apprenticeship program registered with the United States Department of Labor's Bureau of Apprenticeship and Training for elevator mechanics; or
- 3) License(s) issued by another state providing documentation the out of state licensing requirements meet or exceed Missouri requirements, and the license is valid and has not been revoked or suspended.
- 4) Documentation the applicant has at least four (4) years of prior elevator experience and training, and has successfully passed a nationally recognized training program's mechanic's test (subject to acceptance and approval of the Board).

ADDITIONAL REQUIRED DOCUMENTATION

Include the following with this Application:

- 1) A copy of a valid state driver's license or state identification card as proof of applicant's identity; and
- 2) Two (2) passport-type photographs of applicant; and
- 3) A check or money order for the applicable licensing fee (\$75).

Failure to provide all required documentation may result in a denial or a delay in the issuance of a Missouri license.

I hereby certify that I have read, am familiar with and possess a copy of RSMo 701.350 through 701.383 and promulgated rules 11 CSR 40-5.010 through 11 CSR 40-5.195. As a Missouri licensed elevator mechanic, I will perform my duties in accordance with these rules and regulations.

I further certify that I or the company I represent have no direct financial interest in any business or operation which inspects elevator equipment.

Applicant's Signature:

Date: