St. Louis County—Mechanical Paper-and-Pencil Examination Application

STEP 1: Enter your name, address, and other candidate information.

Exam Candidate Information—PRINT LEGIBLY   ALL FIELDS BELOW REQUIRED EXCEPT AS NOTED.

Full Legal Name: _____ ICC or Pearson ID _____

(if you have tested previously)

Mailing Address: _____ City: _____ State: _____ Zip: _____

(____) _____ (____) _____

Primary Telephone Number: _____ Home _____ Work   Secondary Number (optional)

E-mail: _____

STEP 2: Select your exam date and site at which you wish to test.

EXAMINATION SITES AND CORRESPONDING EXAMINATION DATES
(Sites are subject to change)

□ St. Louis, MO
City of St. Louis
2923 North Broadway
Conference Room
St. Louis, MO 63147

EXAM DATES	DEADLINE TO REGISTER	EXAM DATES	DEADLINE TO REGISTER
□ March 12, 2016	January 29, 2016	□ September 10, 2016	July 29, 2016
□ June 11, 2016	April 29, 2016	□ December 10, 2016	October 28, 2016

STEP 3: Read the Important Notes section.

Important Notes
- Applications may be submitted by U.S. mail, courier, or fax.
- Applications must be postmarked by the deadline date.
- Examination fees are non-refundable. Exceptions are outlined in the Information Bulletin.
- A photo identification, such as a driver's license, will be required for admittance to the examination.
- References needed for taking the exams can be purchased from the Code Council by calling 1-800-786-4452 or at shop.iccsafe.org.
- A letter will be forwarded to you confirming this registration approximately two weeks prior to the examination administration date.
- If you have a physical disability that prohibits you from taking an examination under standard conditions, you may request special arrangements. Your letter of request must accompany this application, along with a completed special accommodations form. This form may be obtained by telephoning us at 1-888-422-7233. The request must be submitted and approved by the Code Council by the registration deadline for the test you wish to take.

STEP 4: Select the exam you wish to take (please select only one).

Exam ID and Title	Starting Time
□ 585 Sheet Metal Journeyman	8:00 a.m.
□ 586 Journeyman Pipefitter	8:00 a.m.
□ 587 Sprinkler Fitter	8:00 a.m.
□ 588 HVAC Servicer-Installer Commercial	8:00 a.m.
□ 588 HVAC Servicer-Installer Residential	8:00 a.m.

———— **Both pages of this application must be completed to process.** ————

OFFICE USE ONLY			
Candidate ID: _____	Requirements met: _____	Date processed: _____	Initials: _____

STEP 5: Enter your billing information.

Billing Information

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

(____) _____ (____) _____ _____
Business Telephone Number   Fax Number   ICC Member #

Full payment must be submitted with all applications.   Total Amount: **$ 100.00**

Method of Payment Provided: □ Check/Money Order   □ Visa   □ MasterCard   □ American Express   □ Discover
                                  (Payable to ICC)

Name as it appears on credit card: _____

Signature: _____

Credit Card Number   Expiration Date: Month   Year

STEP 6: Sign your application, attesting all information entered is true.

I have a copy of the current ICC Examination Information Bulletin for my exam program. (If you do not have a copy of the Bulletin, go to www.iccsafe.org/contractor.)

I hereby certify that I am the person indicated above that all the information I have given herein is true and complete to the best of my knowledge, and that any false statement will be cause for voiding this application and/or subsequent applications.

I authorize my score to be reported to each licensing jurisdiction in the examination program.

I further certify that I understand the secure and confidential nature of the examination, and will not reveal the contents of the examination to anyone. I hereby affirm that I will abide by the rules of the examination that are found in the ICC Examination Information Bulletin for my exam program.

Signature: _____ Date: _____

Printed Name: _____

Return this completed application in its entirety along with the appropriate fees to:
International Code Council
Certification & Testing Department
900 Montclair Road
Birmingham, Alabama 35213-1206
Fax: 205-599-9884