

## **CITY OF SAINT PAUL**

DEPARTMENT OF SAFETY AND INSPECTIONS 375 JACKSON STREET, SUITE 220 ST. PAUL, MINNESOTA 55101-1806

ST. PAUL, MINNESOTA 55101-1806 Phone: 651-266-8989 Fax: 651-266-9124 Visit our Web Site at www.stpaul.gov/dsi

## COMPETENCY CARD APPLICATION (For Reciprocal Only)

APPLICANT'S LAST NAME	PPLICANT'S LAST NAME				FIRST NAME									
APPLICANT'S ADDRESS					PHONE NUMBER									
	Lamina													
CITY	STATE				ZIP									
EMAIL														
EMAIL														
MINNESOTA TAX IDENTIFCATION Number:						Circle Type: MN Tax ID / FEIN / SSN								
EMPLOYER'S NAME														
Please enclose completed Competency Card Application, a copy of your current Minneapolis Competency Card and payment (\$22.00 for each card) to the above address.  Checks must be payable to: CITY OF SAINT PAUL														
*PLUMBERS: ENCLOSE A COPY OF STATE PLUMBING LICENSE														
TRADES	MASTER COMP CARD					JOURNEYMAN COMP CARD								
Gas Burner A														
Oil Burner A														
Plumbing/Gas Fitter														
Refrigeration A														
Steam A														
Signature of Cardholder (required for a	all charges):											_		
Please complete the following if paying by o	credit card (cir	rcle one):	Security	7				Exp						
AMEX Discover MasterCard Visa	a		Code	:				Date:						
Enter Your Account Number in the Boxes E	Below:	I	<u> </u>	<u> </u>				ı	Ī					