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2009 Plumbing Code Update Course Certificate of Completion

Michigan Department of Licensing and Regulatory Affairs
Bureau of Construction Codes / Plumbing Division
P.O. Box 30254, Lansing, MI 48909
517-241-9330

Authority: 2002 PA 733

This form can be completed by tabbing to each field and typing in the required information.

Instructions:

Course Provider: Complete Course Provider information including course approval number (classes shall have been previously approved and assigned an approval number by the Plumbing Division). Complete the student information accurately in its entirety with the correct, current license number.

Instructor: Sign Certificate of Completion upon course completion. Retain a copy for your records and provide this to the student at the program's completion.

Course Provider

APPLICANT NAME / CONTACT PERSON		**COURSE APPROVAL NUMBER** **P-**
ADDRESS		
CITY	STATE	ZIP CODE
COURSE LOCATION		
CLASS DATE		

Student Information

NAME (Last Name, First Name, Middle Initial)		CURRENT JOURNEY OR MASTER PLUMBER LICENSE NO.
ADDRESS		
CITY	STATE	ZIP CODE

Signature

INSTRUCTOR'S SIGNATURE	DATE