



DEPARTMENT OF PUBLIC SAFETY
DIVISION OF FIRE SAFETY

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ELEVATOR MECHANIC II

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 II License:

- 1) A certificate of completion documenting the applicant has successfully passed the mechanic examination of a nationally recognized training program for the elevator industry access products (ASME A18.1); 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) A valid license(s) issued by another state (the out of state licensing requirements meet or exceed Missouri requirements) and the license has not been revoked or suspended; or
- 4) For an applicant whose experience does not immediately precede their application, documentation acceptable to the department which establishes the applicant has sufficient previous elevator related training and experience (Subject to the 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: