



FORM 2: PETROLEUM MECHANIC LICENSE APPLICATION FORM
For new applications and renewals

NEW APPLICANTS: Fee: \$0 **CHECK THE LICENSE(S) YOU ARE APPLYING FOR:**

PMH – PETROLEUM MECHANIC HELPER **PM1** – SERVICE AND MAINTENANCE **PM2** – UNDERGROUND INSTALLATION

PM3 – ABOVEGROUND INSTALLATION **SO** – SITE OPERATOR

Check here if this is an addition to your current license(s)

Complete sections 1, 2 & 3

RENEWALS: Fee: \$50.00 **CHECK THE LICENSE(S) YOU ARE RENEWING:**

PMH – PETROLEUM MECHANIC HELPER **PM1** – SERVICE AND MAINTENANCE **PM2** – UNDERGROUND INSTALLATION

PM3 – ABOVEGROUND INSTALLATION **SO** – SITE OPERATOR

Complete sections 1 & 3 and payment section

SECTION 1

FIRST NAME:	MIDDLE NAME:	LAST NAME:
ADDRESS:		
CITY:	PROVINCE:	PC:
TELEPHONE:	FAX:	E-MAIL:
CPCA ID #:	DATE OF BIRTH (YY/MM/DD):	
COMPANY NAME:		

SECTION 2

PROOF OF TRAINING COURSE COMPLETION (if other than CPCA course)
(NOT APPLICABLE TO CHALLENGE PARTICIPANTS)

NAME OF COURSE _____ TRAINING ORGANIZATION _____

ADDRESS _____ CITY _____ PROV _____

COMPLETION DATE (yy/mm/dd) _____ Theoretical Exam Mark _____ PMH Practical Exam (If applicable) PASSED

ATTACH TRANSCRIPT OR LETTER OF COMPLETION

SECTION 3

DECLARATION
MAKING A FALSE STATEMENT MAY RESULT IN REVOCATION OF AUTHORIZATION
FAILURE TO PROVIDE REQUIRED INFORMATION WILL RESULT IN DELAYED PROCESSING

I certify the information I have provided is correct and true. I authorize the verification of the information provided on this form and to my training and work experience.

Signature of applicant _____ Date _____

Payment (for renewals only):

CHEQUES: Payable to **CPCA**. Print form and mail with cheque to **CPCA 51 KING ST # 8, Barrie, ON, L4N 6B5**

CREDIT CARD: Visa Mastercard Card # _____ Exp: _____
(mm/yyyy)

I authorize CPCA to charge my credit card for the fee as indicated above (check here)

Name of Cardholder: _____

FOR OFFICE USE ONLY

HOLD FOR: Fee Training/Challenge Transcripts/Letter Form #3 - Verification of Trade Experience Affidavit

APPLICATION APPROVAL: Accept Reject

License No. _____ Approved by _____ Date _____