



PLUMBING EMPLOYMENT APPLICATION

(Please Print Clearly – complete all 6 pages)

PLUMBING HEATING
5405 County Road 154 Unit E
Glenwood Springs, CO 81601
Phone: (970) 216-8462

Position(s) Applying for: _____

Application Date: ____/____/____

Personal Information

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: ____-____-____ Work Phone: ____-____-____ ext. ____ Cell Phone: ____-____-____

Email Address: (if available) _____

How did you hear about our company? _____

Employment Information

Citizenship/Work Status: U.S. Citizen Green Card Holder U.S. Work Permit/Visa Canadian Citizen Canadian Work Permit/Visa

Current Employer: (if any) _____

Years of Work Experience directly related to the position you are applying for: _____

Employment Type Desired: Full-Time Part-Time

Desired Compensation: \$ _____ Hourly Annual

Other Compensation Desired: _____

When are you available to start work? _____

Education

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION	# OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College/University				
Bus. or Trade School				
Professional School				

Criminal History

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR MISDEMEANOR (except any minor traffic violations)? No Yes

If yes, please explain and attach any relevant documentation. _____

Drivers License Information

DO YOU HAVE A VALID DRIVER'S LICENSE? Yes No

Do you have reliable transportation to work (please be specific)? _____

Driver's license number: _____ State of Issue: _____

Operator Commercial (CDL) Chauffeur Do you have a clean driving record? Yes No

List any Moving Violations and/or Accidents from the last 3 years: _____

Military Service

HAVE YOU EVER BEEN IN THE ARMED FORCES? Yes No Branch: _____

ARE YOU CURRENTLY A MEMBER OF THE NATIONAL GUARD or RESERVES? Yes No

Specialty _____ Date Entered _____ Discharge Date _____

Work Experience

Please list your work experience for the past 5 years beginning with your most recent job.

If you were self-employed, give firm name. Attach additional sheets if necessary. Attach Resume if applicable.

Name of employer:	Name of last supervisor	Employment dates	Pay or salary
Address with city/state/zip:		From To	Start Final
Phone:	Your last job title		
Specific reason for leaving			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Name of employer:	Name of last supervisor	Employment dates	Pay or salary
Address with city/state/zip:		From To	Start Final
Phone:	Your last job title		
Specific reason for leaving			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Name of employer: Address with city/state/zip: Phone:	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	Your last job title		
Specific reason for leaving			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Name of employer: Address with city/state/zip: Phone:	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	Your last job title		
Specific reason for leaving			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No			

PLUMBING INDUSTRY SKILLS SECTION INSTRUCTIONS: ONLY select the specific industry skills that you consider yourself to be very knowledgeable about, with a high level of competency.

Plumbing Industry Skills

What types of systems have you worked with? (Select all that apply)

- | | | |
|-------------------------------------------------|-------------------------------------------------|-----------------------------------------------------|
| <input type="checkbox"/> Backflow Prevention | <input type="checkbox"/> Fire Sprinkler Systems | <input type="checkbox"/> Sanitation Systems |
| <input type="checkbox"/> Boilers | <input type="checkbox"/> Geo Thermal | <input type="checkbox"/> Septic Systems |
| <input type="checkbox"/> Chilled Water | <input type="checkbox"/> Heating Systems | <input type="checkbox"/> Storm Drainage Systems |
| <input type="checkbox"/> Chillers | <input type="checkbox"/> Hot Water Systems | <input type="checkbox"/> Water Conditioners |
| <input type="checkbox"/> Circulating Systems | <input type="checkbox"/> Hydronic | <input type="checkbox"/> Water Filtration Systems |
| <input type="checkbox"/> Cold Water Systems | <input type="checkbox"/> In-Floor | <input type="checkbox"/> Water Heaters |
| <input type="checkbox"/> Compressed Air Systems | <input type="checkbox"/> Irrigation Systems | <input type="checkbox"/> Water Purification Systems |
| <input type="checkbox"/> Distribution Systems | <input type="checkbox"/> Medical Gas Systems | <input type="checkbox"/> Well Water Systems |
| <input type="checkbox"/> Drainage Systems | <input type="checkbox"/> Radiant Heating | |

What types of pipe and lines have you worked with? (Select all that apply)

- | | | | | |
|------------------------------------------|-------------------------------------------------|---------------------------------------------------|------------------------------------------|----------------------------------------------|
| <input type="checkbox"/> ABS Pipe | <input type="checkbox"/> DMV Pipe | <input type="checkbox"/> Hydraulic Lines | <input type="checkbox"/> Oil | <input type="checkbox"/> Sewer Line |
| <input type="checkbox"/> Air Lines | <input type="checkbox"/> FIP (Female Iron Pipe) | <input type="checkbox"/> IPS (Iron Pipe Size) | <input type="checkbox"/> Oxygen Lines | <input type="checkbox"/> Steel Pipe |
| <input type="checkbox"/> Black Iron Pipe | <input type="checkbox"/> Flexible Hoses | <input type="checkbox"/> Lead Pipe | <input type="checkbox"/> Pneumatic Lines | <input type="checkbox"/> Supply Lines |
| <input type="checkbox"/> Cast Iron Pipe | <input type="checkbox"/> Fuel | <input type="checkbox"/> LPG (Liquid Propane Gas) | <input type="checkbox"/> Propane | <input type="checkbox"/> Vacuum Lines |
| <input type="checkbox"/> Copper Pipe | <input type="checkbox"/> Galvanized Pipe | <input type="checkbox"/> MIP (Male Iron Pipe) | <input type="checkbox"/> PVC Pipe | <input type="checkbox"/> Vitrified Clay Pipe |
| <input type="checkbox"/> CPUC Pipe | <input type="checkbox"/> Glass Pipe | <input type="checkbox"/> Natural Gas | <input type="checkbox"/> Sanitary Lines | <input type="checkbox"/> Water |

What Applications do you have experience with? (Select all that apply)

- | | | | | |
|-----------------------------------------|----------------------------------------------|---------------------------------------|-------------------------------------------|--------------------------------------|
| <input type="checkbox"/> Aircraft | <input type="checkbox"/> Government Projects | <input type="checkbox"/> Industrial | <input type="checkbox"/> Off-Shore | <input type="checkbox"/> Residential |
| <input type="checkbox"/> Clean Rooms | <input type="checkbox"/> Grocery Stores | <input type="checkbox"/> Marine | <input type="checkbox"/> Pools | <input type="checkbox"/> Restaurants |
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Hospitals | <input type="checkbox"/> Multi-Family | <input type="checkbox"/> Public Utilities | <input type="checkbox"/> Schools |
| <input type="checkbox"/> Floating Floor | | | | |

Plumbing Industry Skills Continued

What specific parts, pumps, valves, fittings, etc. have you worked with? (Select all that apply)

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|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Aerator
<input type="checkbox"/> Air Admittance Valves
<input type="checkbox"/> Air Gaps
<input type="checkbox"/> Ball Valves
<input type="checkbox"/> Bath Tubs
<input type="checkbox"/> Bidets
<input type="checkbox"/> Closet Flanges
<input type="checkbox"/> Commodes
<input type="checkbox"/> Compressors
<input type="checkbox"/> Dish Washers
<input type="checkbox"/> Diverter
<input type="checkbox"/> Dual Check Valves
<input type="checkbox"/> Fittings
<input type="checkbox"/> Fixed Flow Restrictors
<input type="checkbox"/> Fixtures | <input type="checkbox"/> Flange
<input type="checkbox"/> Garbage Disposals
<input type="checkbox"/> Grease Traps
<input type="checkbox"/> Ice Machines
<input type="checkbox"/> Instant Hot Water
<input type="checkbox"/> Interceptors
<input type="checkbox"/> Leaders
<input type="checkbox"/> Lift Stations
<input type="checkbox"/> Lint Traps
<input type="checkbox"/> Mixing Valves
<input type="checkbox"/> PEX insert fittings and valves
<input type="checkbox"/> Pressure Balance Valve
<input type="checkbox"/> Pressure Reducing Valves
<input type="checkbox"/> Pumps | <input type="checkbox"/> Roof Drains
<input type="checkbox"/> Separators
<input type="checkbox"/> Sewage Ejectors
<input type="checkbox"/> Showers
<input type="checkbox"/> Sinks
<input type="checkbox"/> Sump Pumps
<input type="checkbox"/> Supply Stops
<input type="checkbox"/> Thermostatic Valve
<input type="checkbox"/> Traps
<input type="checkbox"/> Urinals
<input type="checkbox"/> Vacuum Breaker
<input type="checkbox"/> Valves
<input type="checkbox"/> Vent
<input type="checkbox"/> Water Hammer Arrestors |
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What Job Functions have you performed? (Select all that apply)

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| <input type="checkbox"/> Activity Reporting
<input type="checkbox"/> Activity Tracking
<input type="checkbox"/> Advertising (broadcast)
<input type="checkbox"/> Advertising (online)
<input type="checkbox"/> Advertising (print)
<input type="checkbox"/> Assembling
<input type="checkbox"/> Backflow
<input type="checkbox"/> Brazing
<input type="checkbox"/> Budgeting
<input type="checkbox"/> Building Codes
<input type="checkbox"/> Business Development
<input type="checkbox"/> Call Center Management
<input type="checkbox"/> Carpentry
<input type="checkbox"/> Change Orders
<input type="checkbox"/> Channel Development
<input type="checkbox"/> Chemical Drain Treatment
<input type="checkbox"/> Chemical Septic Tank Treatment
<input type="checkbox"/> Clamping
<input type="checkbox"/> Client Interaction
<input type="checkbox"/> Client/Account Management
<input type="checkbox"/> Cold Calling
<input type="checkbox"/> Commission Development
<input type="checkbox"/> Computer Literate
<input type="checkbox"/> Consultative Selling
<input type="checkbox"/> Contract Negotiations
<input type="checkbox"/> Contract/Proposal Preparation
<input type="checkbox"/> Conventions/Trade Shows
<input type="checkbox"/> Cross Connection
<input type="checkbox"/> Customer Service
<input type="checkbox"/> Cutting Torch
<input type="checkbox"/> Data Entry
<input type="checkbox"/> Department Forecasting
<input type="checkbox"/> Design/Build
<input type="checkbox"/> Designer
<input type="checkbox"/> Develop Relationships/Alliances
<input type="checkbox"/> Dispatcher
<input type="checkbox"/> Drafting
<input type="checkbox"/> Draftsman
<input type="checkbox"/> Drain Cleaning | <input type="checkbox"/> Driving
<input type="checkbox"/> Drywall Repair
<input type="checkbox"/> Engineer/PE
<input type="checkbox"/> Estimator
<input type="checkbox"/> Executive
<input type="checkbox"/> Expense Reports
<input type="checkbox"/> Facility Manager
<input type="checkbox"/> Field Supervisor
<input type="checkbox"/> Flaring
<input type="checkbox"/> Forecasting
<input type="checkbox"/> Foreman
<input type="checkbox"/> Four-Wheel Steel Pipe Cutter
<input type="checkbox"/> Gasket Join
<input type="checkbox"/> General Construction
<input type="checkbox"/> General Manager
<input type="checkbox"/> Gluing
<input type="checkbox"/> Goal Setting
<input type="checkbox"/> Hydro Jetting
<input type="checkbox"/> Hydrostatic testing
<input type="checkbox"/> Inspector
<input type="checkbox"/> International
<input type="checkbox"/> International Plumbing Code
<input type="checkbox"/> Inventory Control
<input type="checkbox"/> Journeyman
<input type="checkbox"/> Layout
<input type="checkbox"/> Lead Generation
<input type="checkbox"/> Lead Management
<input type="checkbox"/> Lead Oakum Joint
<input type="checkbox"/> Leadership
<input type="checkbox"/> Leak Detection
<input type="checkbox"/> Leak Detection Equipment
<input type="checkbox"/> Machine Operator
<input type="checkbox"/> Maintenance
<input type="checkbox"/> Maintenance - Apartment
<input type="checkbox"/> Manager
<input type="checkbox"/> Manufacturer Rep
<input type="checkbox"/> Market Analysis
<input type="checkbox"/> Material Handler
<input type="checkbox"/> National Standard Plumbing Code | <input type="checkbox"/> Negotiate Contracts
<input type="checkbox"/> NFSA Apprentice Program
<input type="checkbox"/> OEM
<input type="checkbox"/> One-Wheel Steel Pipe Cutter
<input type="checkbox"/> Operate Power Tools
<input type="checkbox"/> Operations Manager
<input type="checkbox"/> P&L
<input type="checkbox"/> PHCC Apprentice Program
<input type="checkbox"/> Pipe Bending
<input type="checkbox"/> Pipe Cutting
<input type="checkbox"/> Pipe Joining
<input type="checkbox"/> Pipe Threading
<input type="checkbox"/> Pipe Threading Machine
<input type="checkbox"/> Piping
<input type="checkbox"/> Plan-O-Grams/Schematics
<input type="checkbox"/> Plan/Spec
<input type="checkbox"/> Policy/Procedure Development
<input type="checkbox"/> Power Driven Vise Stand
<input type="checkbox"/> Power Tools
<input type="checkbox"/> Prepare Financial Reports
<input type="checkbox"/> Presentation Preparation
<input type="checkbox"/> Preventative Maintenance
<input type="checkbox"/> Product Demonstration
<input type="checkbox"/> Production
<input type="checkbox"/> Production Specialist
<input type="checkbox"/> Project Management
<input type="checkbox"/> Project Scheduling
<input type="checkbox"/> Promotions Development
<input type="checkbox"/> Proposal Development
<input type="checkbox"/> Proposal Presentation
<input type="checkbox"/> Prospecting/Lead Generation
<input type="checkbox"/> Punch List
<input type="checkbox"/> Purchase Orders
<input type="checkbox"/> Purchasing
<input type="checkbox"/> Quality Assurance/Control
<input type="checkbox"/> Re-Piping
<input type="checkbox"/> Report Generation
<input type="checkbox"/> Reporting
<input type="checkbox"/> Research | <input type="checkbox"/> Rough-In
<input type="checkbox"/> Safety Coordinator
<input type="checkbox"/> Sales
<input type="checkbox"/> Sales - In Home
<input type="checkbox"/> Sales - Residential
<input type="checkbox"/> Sales - Retail
<input type="checkbox"/> Sales - Wholesale
<input type="checkbox"/> Sales Management, Area
<input type="checkbox"/> Sales Management, National
<input type="checkbox"/> Sales Management, Regional
<input type="checkbox"/> Sales Training Development
<input type="checkbox"/> Service
<input type="checkbox"/> Service Agreements
<input type="checkbox"/> Sewer Snakes
<input type="checkbox"/> Shipping Coordination
<input type="checkbox"/> Shipping/Receiving
<input type="checkbox"/> Sizing Pipes
<input type="checkbox"/> Soldering
<input type="checkbox"/> Staffing
<input type="checkbox"/> Steamfitter
<input type="checkbox"/> Strategic Alliances
<input type="checkbox"/> Superintendent
<input type="checkbox"/> Supervision
<input type="checkbox"/> Take-offs
<input type="checkbox"/> Team Building
<input type="checkbox"/> Technician
<input type="checkbox"/> Telemarketing - Inbound
<input type="checkbox"/> Telemarketing - Outbound
<input type="checkbox"/> Territory Management
<input type="checkbox"/> Trainer
<input type="checkbox"/> Troubleshooting
<input type="checkbox"/> Tubing Cutter
<input type="checkbox"/> ULF (Ultra Low Flush)
<input type="checkbox"/> Under Slab Re-Route
<input type="checkbox"/> Under Slab Repairs
<input type="checkbox"/> Uniform Plumbing Code
<input type="checkbox"/> Vendor Coordination
<input type="checkbox"/> Water Service
<input type="checkbox"/> Welding |
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What Computer related experience do you have? (Select all that apply)

- | | | | | |
|-------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|--------------------------------------------------------------------------|
| <input type="checkbox"/> ACT
<input type="checkbox"/> Approach
<input type="checkbox"/> AutoCad | <input type="checkbox"/> Estimation (software)
<input type="checkbox"/> Goldmine
<input type="checkbox"/> MS Access | <input type="checkbox"/> MS Excel
<input type="checkbox"/> MS Office
<input type="checkbox"/> MS PowerPoint | <input type="checkbox"/> MS Word
<input type="checkbox"/> QuickPen | <input type="checkbox"/> SalesLogix
<input type="checkbox"/> WinSales |
|-------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|--------------------------------------------------------------------------|

Certifications & Licenses

What Certifications & Licenses do you have? (Select all that apply)

- | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Apprentice Plumber License
<input type="checkbox"/> ASPE - CPD (Certified in Plumbing Design)
<input type="checkbox"/> IAMPO Certified Inspector
<input type="checkbox"/> ICC Commercial Plumbing Inspector | <input type="checkbox"/> ICC Plumbing Code Official
<input type="checkbox"/> ICC Plumbing Inspector
<input type="checkbox"/> ICC Plumbing Plans Examiner
<input type="checkbox"/> ICC Residential Plumbing Inspector | <input type="checkbox"/> Journeyman Plumber License
<input type="checkbox"/> Master Plumber License
<input type="checkbox"/> NSF Certification
<input type="checkbox"/> Registered Professional Engineer |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Include State and License Numbers for any licenses selected above, if applicable: _____

Other Licenses & Certifications held: _____

Additional Information

Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying. If you have a resume, please include it with this application.

Multiple empty horizontal lines for providing additional information.

Professional References

Please list 3-4 people you have worked with who can attest to your On-the-Job experience and performance.

Form with two columns for professional references, each containing fields for Name, Position, Company, Telephone, and Email Address.

Did you complete this application yourself? Yes No

If not, who did? _____

AGREEMENT (PLEASE READ CAREFULLY BEFORE SIGNING)

I certify that all the information on this application is accurate and complete to the best of my knowledge and understand that misleading or false statements will constitute sufficient cause for refusal of hire or termination of my employment.

I understand that neither the acceptance of this application nor the subsequent entry into any type of employment relationship with Big Mountain Plumbing, LLC creates an actual or implied contract of employment. I understand that, if I accept employment with Big Mountain Plumbing, LLC, it will be on an at-will basis. This means that either Big Mountain Plumbing, LLC or I have the right to terminate the employment relationship at any time, for any reason, with or without cause.

I agree to submit to drug and alcohol testing, if requested by Big Mountain Plumbing, LLC. I release Big Mountain Plumbing, LLC, and its employees, plus other persons or companies, from any and all liability arising out of or related in any way to such testing.

I authorize Big Mountain Plumbing, LLC to investigate information concerning my education, licensing, certifications, driving record, criminal history, employment experiences and all other aspects of my background relevant to my proposed employment. I release Big Mountain Plumbing, LLC and its employees from all liability arising from such investigation.

Signature of Applicant: _____ **Date:** ____/____/____

Print Name: _____

Big Mountain Plumbing, LLC is an equal opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with Big Mountain Plumbing, LLC depends solely on your qualifications.