



11/13/06

2007 Paper – Pencil Lincoln, NE Examination Application

Exam Candidate Information – Print legibly

Name: _____ Social Security Number (optional): _____
Street Address: _____ City: _____ State: _____ Zip: _____
() _____ () _____ () _____
Business Telephone Number Home Telephone Number Fax Number
E-mail address (optional): _____

CONTRACTOR EXAMINATION

Exam Location: (999) Lincoln

Exam Date (Please fill in the exam date below.)

CONTRACTOR EXAMINATIONS

Journeyman HVAC (208)

Important Notes

- Applications may be submitted by U.S. Mail, courier or facsimile.
- Applications must be completed in its entirety in order to be processed.
- Examination fees are nonrefundable. Exceptions are outlined in the Candidate Bulletin.
- Photo identification, such as a drivers license, will be required for admittance to the examination.
- References needed for taking the exams can be purchased from ICC by calling 1-888-422-7233 or at www.iccsafe.org.
- It is your responsibility to make sure you show up for the exam on the date you choose.
- If you have a physical disability that prohibits you from taking an examination under standard conditions, you may request special arrangements. A special accommodations form and appropriate documentation must accompany this application. This form may be obtained by telephoning us at 1-877-783-3926.

The front and back of this application must be completed to process.

INVOICE CITY OF LINCOLN

Return this completed application in its entirety to:

International Code Council
Certification and Testing Department
900 Montclair Road
Birmingham, Alabama 35213-1206
Fax: 205-599-9884

I authorize my score to be reported to each licensing jurisdiction in the examination program.

I further certify that I understand the secure and confidential nature of the examination, and will not reveal the contents of the examination to anyone. I hereby affirm that I will abide by the rules set forth by the ICC.

Signature: _____ Date: _____