STATE OF CONNECTICUT DEPARTMENT OF CONSUMER PROTECTION

OCCUPATIONAL & PROFESSIONAL LICENSING DIVISION

Telephone: (860) 713-6135 Email: occprotrades@ct.gov Web Site: www.ct.gov/dcp



For Official Use Or	nly

Application for Residential Stair Lift Apprentice Trainee Registration

Eligibility for an Residential Stair Lift Apprentice Trainee Registration:

- 1) Have successfully completed high school or its equivalent;
- 2) Attach applicant training program out line including content and hours for both related instruction and on the job training which shall be followed, as prescribed in Sec. 21a-340f-2, Regulations of Connecicut State Agencies.
- 3) Attach list of all licensed persons and license numbers and type(s) that are available to supervise and train such applicant.
- → Return your completed application to:

Department of Consumer Protection
Occupational and Professional Licensing Division
450 Columbus Boulevard, Hartford, CT 06103

Applicant / Trainee Information:

First Name	Middle Initial Last Name			Occupation				
1 Hot I valle	Wildaic Illitial	Lustivanie			Occupation			
Street Address	City or Town					State	Zip Code	
							*	
Telephone Number (w/ area code)	Social Security Number			Email Address			Date of Birth	
					I m 1 1		/	
Your Employer / Company Name (Program Sponsor) Telephor						Number (w	/ Area Code)	
Street Address	City or Town					State	Zip Code	
Street Address	City of Town					State	Zip Code	
Contractor license number and type: Licensed Contractor Name:								
Contractor neerise number and type.			Lice	rised Contractor Ivallie.				
Has the applicant ever been	Yes N	No						
convicted of a felony crime?								
· · · · · · · · · · · · · · · · · · ·	1							
A								
Any persons making any misstatement as to experience or other qualifications, or any person subscribing to or vouching for any								
MISSTATEMENT SHALL BE SUBJECT TO THOSE PENALTIES AS PROVIDED FOR IN THE CONNECTICUT GENERAL STATUTES.								
GIGNIED (A. 1: (/T. :	1		CIC.	NED /L' 1.C.	. 1	1 / ()		
SIGNED (Applicant / Trainee)			SIG	NED (Licensed Contrac	ctor ana numi	per/type)		
SIGNED (Employer / Company) Date:								
SIGNED (Employer / Company)			vate:					