Reset

APPLICATION FOR POWER ENGINEER EXAMINATION / LICENCE

02/20

Name		Licence #		Class	
Mailing Address	Street Number	Street Name	Municipality	Province	Postal Code
Telephone	Home	Work	Fax		
Date of Birth	Year	Month	Day	Email	

EXAMINATION REQUESTED (Please Check)

First Class	Second Class	Third Class	Fourth Class
☐ A1 ☐ A2 ☐ A3 ☐ A4	☐ A1 ☐ A2 ☐ A3	☐ A1 ☐ A2	☐ A
☐ B1 ☐ B2 ☐ B3 ☐ B4	☐ B1 ☐ B2 ☐ B3	☐ B1 ☐ B2	☐ B

Language Preference
☐ English ☐ French ☐ Bilingual

Preferred Location of Examination
☐ Fredericton ☐ Saint John ☐ Bathurst
☐ Other _____ Date _____

Are you currently enrolled in Block Release Training? ☐ Yes ☐ No Full-time student? ☐ Yes ☐ No

Course Location		Date		Instructor's Signature	

TO BE COMPLETED BY CHIEF POWER ENGINEER

Name of Employer					
Mailing Address	Street Number	Street Name	Municipality	Province	Postal Code
Telephone		Fax		Plant Location	
Total number months/years of operating experience for applicant	_____ Years _____ Months			Total therm hour rating of boilers	
Chief Power Engineer's Signature		Phone #	Licence #	Date	
Board Decision	☐ Approved	☐ Not Approved	☐ Examination Required		
Signature		Date			

PAYMENT INSTRUCTIONS	METHOD OF PAYMENT
Method of Payment: * Cheque or money order made payable to the "Minister of Finance" * Credit Card (Visa or MasterCard ONLY) **Fee: $40.00 each exam**	☐ Cheque ☐ Money Order ☐ Visa ☐ MasterCard Card # Month Year Expiry Date Signature _____

Department of Public Safety
Technical Inspection Services
Phone: (506) 457-6480

New Nouveau Brunswick

PO Box 6000
Fredericton, NB E3B 5H1
Fax: (506) 457-7394
E-mail application to: PowerExams@gnb.ca

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