

Wisconsin Department of Safety and Professional Services

Office Location: 4822 Madison Yards Way

Madison, WI 53705

Phone Number: (608) 266-2112

LicensE Portal: [License.wi.gov](https://license.wi.gov)

Email: dsps@wisconsin.gov

Website: <http://dsps.wi.gov>

DIVISION OF PROFESSIONAL CREDENTIAL PROCESSING

MASTER PLUMBER RESTRICTED APPLIANCE LICENSE APPLICATION INFORMATION

Requirements for Credential

Per [Wis. Stat. § 145.06](#), no person may engage in or work at plumbing in the state unless licensed to do so by the Department.

Pursuant to [Wis. Stat. § 145.14](#), the plumbing activities that may be undertaken by a person who holds a credential as a licensed Master Plumber Restricted Appliance, licensed Journeyman Plumber Restricted Appliance, or registered Plumbing Learner Restricted Appliance shall be limited to installing a water treatment device, a water heater, or any other item in connection with a water distribution system, including a stormwater use or reclaimed water system, which does not require a direct connection to a drain system.

Per [Wis. Admin. Code § SPS 305.92](#), for any plumbing installation that requires a uniform building permit under [Wis. Admin. Code § SPS 320.08](#), a person who holds a Master Plumber Restricted Appliance license or a Master Plumber Restricted Service license may not commence installation of plumbing until a permit is issued for the installation.

AN APPLICATION IS NOT COMPLETE UNTIL ALL OF THE FOLLOWING DOCUMENTS HAVE BEEN RECEIVED:

A person may obtain a credential as a licensed Master Plumber Restricted Appliance by **one** category below.

A. – Experience and Examination

Completing the necessary hours of experience and passing the Master Plumber Restricted Appliance license examination.

1. **Application and Fees:** Apply and pay fees online in LicensE, <https://license.wi.gov>. Fees will be calculated in LicensE. If needed, you can save your application and complete and submit it later. NOTE: If DSPS requests additional documents they must be uploaded within three months from the date they were requested. Failure to do so may result in having to submit a new application and pay fees.
2. **Experience:** A person applying for a Master Plumber Restricted Appliance license examination shall have completed at least 1,000 hours of experience as a licensed Wisconsin Journeyman Plumber Restricted Appliance or Journeyman Plumber per year for at least two years. **Complete** the Experience Form 3130T on the next page.
3. **Examination:** You will be made eligible to test after your application has been submitted and reviewed. If additional documents are required you will be made eligible to test after all documentation has been received and reviewed. A communication will be sent once you are made eligible to test. Please check your "junk" or "spam" email folders. You can also check the status of your application by entering your Preliminary Application Number (PAR) at <https://license.wi.gov/s/application-status-lookup>. If you fail an exam, you must login to License, <https://license.wi.gov>, and pay another exam fee.

B. – Wisconsin Master Plumber Restricted Appliance License which had been exchanged for a Journeyman Plumber Restricted Appliance License

A person who held a Wisconsin Master Plumber Restricted Appliance license but exchanged it for a Journeyman Plumber Restricted Appliance license may, upon application to the Department, exchange his or her current Journeyman Plumber Restricted Appliance license for a Wisconsin Master Plumber Restricted Appliance license.

1. **Application and Fee:** Apply and pay fees online in LicensE, <https://license.wi.gov>. Fees will be calculated in LicensE. If needed, you can save your application and complete and submit it later. NOTE: If DSPS requests additional documents they must be uploaded within three (3) months from the date they were requested. Failure to do so may result in having to submit a new application and pay fees.
2. **Master Plumber Restricted Appliance License:** **Upload** your original Master Plumber Restricted Appliance license. You must have completed the necessary amount of continuing education.

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MASTER PLUMBER RESTRICTED APPLIANCE EXPERIENCE FORM

APPLICANT Complete the applicant section of the form. Obtain the required signatures in the Experience Table then upload the completed form into your LicenseE account, https://license.wi.gov/ .			
Last Name	First Name	MI	Former/Maiden Name(s)
If applying under Category A, "Experience and Examination" on page i of Form 3130 this form is required. Use additional sheets if needed.			Application Number
			PAR-

EXPERIENCE TABLE (Upload additional sheets if needed.)			
1.	Name of Witness		WI License #
	Start (Month/Year): ____ / ____ / ____	End (Month/Year): ____ / ____ / ____	Hours: _____
	Signature of Witness/School (If unable to provide a digital signature print and sign form.)	Date	Witness Phone Number
		__ / __ / __	____ - ____ - ____
2.	Name of Witness		WI License #
	Start (Month/Year): ____ / ____ / ____	End (Month/Year): ____ / ____ / ____	Hours: _____
	Signature of Witness/School (If unable to provide a digital signature print and sign form.)	Date	Witness Phone Number
		__ / __ / __	____ - ____ - ____
3.	Name of Witness		WI License #
	Start (Month/Year): ____ / ____ / ____	End (Month/Year): ____ / ____ / ____	Hours: _____
	Signature of Witness/School (If unable to provide a digital signature print and sign form.)	Date	Witness Phone Number
		__ / __ / __	____ - ____ - ____
4.	Name of Witness		WI License #
	Start (Month/Year): ____ / ____ / ____	End (Month/Year): ____ / ____ / ____	Hours: _____
	Signature of Witness/School (If unable to provide a digital signature print and sign form.)	Date	Witness Phone Number
		__ / __ / __	____ - ____ - ____
5.	Name of Witness		WI License #
	Start (Month/Year): ____ / ____ / ____	End (Month/Year): ____ / ____ / ____	Hours: _____
	Signature of Witness/School (If unable to provide a digital signature print and sign form.)	Date	Witness Phone Number
		__ / __ / __	____ - ____ - ____