



CONSTRUCTION AND DEVELOPMENT SERVICES DIVISION
425 East State Street
Rockford, IL 61104

To obtain a mechanical license from the City of Rockford, you must qualify and be approved by the Mechanical Board to take the mechanical examination and shall pass the examination as provided by the Mechanical Board. The following qualifications and requirements are from the 2003 International Mechanical Code as amended:

All applicants for a license shall be of legal age, and shall:

1. have had at least five (5) years of experience in the trade for the class of license he is applying for or;
2. have a degree in related mechanical technologies from an accredited university or college for the class of license he is applying for plus one (1) year of practical experience in that class or;
3. have completed a registered apprenticeship program recognized by the Mechanical Board for the class of license that he is applying for,

An applications for a mechanical license shall be filed with the code official 30 DAYS prior to the date on which an examination is held.

Examination for license is given by the Mechanical Board on the second Thursday of every month. The applicant must test within 90 calendar days of approval to test or will have to re-apply. Forty-eight hour notice of intent to take the license exam is required.

This license application must be notarized.

Classes of License

There shall be five (5) classes of license issued pertaining to heating, cooling, ventilation, hydronics, refrigeration, gas piping, and fireplaces in the City of Rockford.

- Class A** Class A license shall be issued to a person desiring to enter into the business of installing, altering, or repairing warm air heating, air conditioning, and ventilating equipment.
- Class B** Class B license shall be issued to a person desiring to enter into the business of installing, altering, or repairing boilers, hydronics, steam heating, and solar systems.
- Class D** Class D license shall be issued to a person desiring to enter into the business of installing, altering, or repairing of refrigeration piping of kitchen equipment or equivalent such as: walk in coolers, walk in freezers, dairy cases, ice machines and the refrigerant piping of comfort cooling equipment only.
- Class E** Class E license shall be issued to a person desiring to enter into the business of installing, altering, or repairing any or all of the consumer gas piping from the point of delivery to the gas cock preceding the appliance.
- Class E1** Installation, repair, or altering of any or all of the consumer gas piping from the point of delivery(meter) to the gas shut-off valve immediately preceding the appliance. Under one P.S.I.G. and less than 2 ½" diameter pipe.
- Class F** Class F license shall be issued to a person desiring to enter into the business of installing prefabricated fireplaces, gas logs, Franklin stoves, inside barbecue burners or pits, and inside charcoal pits.
- Solar Systems** Class B license, Plumbing Contractor registration, and Plumber's license required.
- Geothermal** Class A license, Class B license, Plumbing Contractor registration, and Plumber's license required.



BUILDING DIVISION
425 East State Street
Rockford, IL 61104

Mechanical License Application

This form must be completed in full. Answers must be in ink. The statements must be attested to by a Notary Public. Failure to comply with the above instructions will delay action on this application. When completed, this form must be presented to the Building Department, Mechanical Division.

TO BE FILLED OUT BY THE APPLICANT FOR REGISTRATION

Name of individual applying for license: _____
Address: _____ <small>City State Zip</small>
Phone: _____

Business name of person, firm, or corporation to whom permits are to be issued: _____
Address: _____ <small>City State Zip</small>
Phone: _____

Circle Class(es) of license applied for: A B D E E1 F

Are you currently licensed as a mechanical contractor in any other municipality or state?
YES NO
<i>*if yes, please attach notarized documentation of license</i>

Work History

Name of Company/Business:	From (M/Y)	To (M/Y)	Type of Business	Phone Number	
Street address		City		State	Zip
Job Title			Supervisor's Name		
Job duties:					

Name of Company/Business:	From (M/Y)	To (M/Y)	Type of Business	Phone Number	
Street address		City		State	Zip
Job Title			Supervisor's Name		
Job duties:					

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Street address		City		State	Zip
Job Title			Supervisor's Name		
Job duties:					

Name of Company/Business:	From (M/Y)	To (M/Y)	Type of Business	Phone Number	
Street address		City		State	Zip
Job Title			Supervisor's Name		
Job duties:					

Person, Firm, or Corporation applying for registration

by _____
signature and date

ALL ATTACHMENTS AND INFORMATION TO BE NOTARIZED

*State of Illinois
County of Winnebago*

_____ *is a legal resident of* _____

County of _____ *State of* _____ *being sworn before me,*

and that all statements are tru to the best of my knowledge and belief. *Sworn and subscribed to me this*

_____ day of _____, _____ at,

_____ *County of* _____ *and state of* _____

Notary Public _____