

# JOSEPHINE THE PLUMBER

345 LOCUST ST,  
MT. VERNON, NY 10550  
(914) 776-0700  
Email: INFO@JosephineThePlumber.com

www.JosephineThePlumber.com

7-Hour Periodic Gas Inspector

**Provider No. CP028**

## 7-Hour Periodic Gas Inspector Qualification

PLEASE COMPLETE THE REGISTRATION FORM AND WAIVER. SEND BOTH PAGES WITH A CHECK OR MONEY ORDER TO:

JOSEPHINE THE PLUMBER  
345 LOCUST ST.  
MOUNT VERNON, NY 10550

Fee: **\$475** - Includes the cost of Worker Wallet Card

UPON RECEIPT OF REGISTRATION FORM AND PAYMENT, YOU WILL GET A CONFIRMATION EMAIL

Course Location:

JOSEPHINE THE PLUMBER  
345 LOCUST ST. - (LOWER LEVEL)  
MOUNT VERNON, NY 10550

**Class times vary - please confirm your start time on our website.**

Late arrivals will be turned away.

NYC DOB requires the course provider to upload a photo to DOB website. You can either email a passport type photo, or we will take a photo on the day of your class. **Please complete all questions on page 2 to ensure DOB credentials can be issued to you.**

**DON'T FORGET your Government ID for class !**

**\*\*bring any certifications if applicable for worker wallet updates.**

# JOSEPHINE THE PLUMBER

345 LOCUST ST,  
MT. VERNON, NY 10550  
(914) 776-0700  
Email: INFO@JosephineThePlumber.com

www.JosephineThePlumber.com

7-Hour Periodic Gas Inspector  
**Provider No. CP028**

COURSE DATE and TIME:

STUDENT NAME: \_\_\_\_\_

COMPLETE MAILING ADDRESS WITH CITY STATE AND ZIP (HOME OR OFFICE) \_\_\_\_\_

COMPANY NAME (if applicable) \_\_\_\_\_

COMPANY PHONE # (if applicable) \_\_\_\_\_

CELL # \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

\_\_\_\_\_  
ft. in.  
HEIGHT

\_\_\_\_\_  
EYE COLOR

\_\_\_\_\_  
DATE OF BIRTH mm/dd/yyyy

SIGNATURE AND DATE: \_\_\_\_\_

## INTERNAL USE ONLY

TC Verified ☐ Yes ☐ No

Photo Provided ☐ Yes ☐ No

Fee Collected ☐ Yes ☐ No Amount: \$ \_\_\_\_\_ Method: ☐ Cash ☐ Check ☐ Card ☐ Other \_\_\_\_\_

ID Verified ☐ Yes ☐ No Type of ID \_\_\_\_\_ Verified By: \_\_\_\_\_

Staff Initials \_\_\_\_\_ Date Processed \_\_\_\_\_

# JOSEPHINE THE PLUMBER

345 LOCUST ST,  
MT. VERNON, NY 10550  
(914) 776-0700  
Email: INFO@JosephineThePlumber.com

www.JosephineThePlumber.com

7-Hour Periodic Gas Inspector  
**Provider No. CP028**

## CANCELLATION POLICY

Please note that all course fees are non-refundable. In the event that a course date is cancelled, Josephine The Plumber LLC will make reasonable efforts to reschedule it as soon as possible. If a course date is cancelled and not rescheduled within ninety (90) days, Josephine The Plumber LLC's liability will be limited to the amount paid by the participant for the cancelled course, which will either be credited toward a future course or refunded within ninety (90) days. Thank you for your understanding.

Late arrivals or early departures are not permitted. Please arrive on time and remain for the entire duration of the class. If a participant misses any class time, no credit will be given, and the course will be forfeited along with the fee. Certificates of completion and worker wallet card will be issued only after course completion and full payment has been received.

## WAIVER OF CONSEQUENTIAL DAMAGES

Under no circumstances shall Josephine The Plumber LLC be liable for any consequential, indirect, incidental, special, punitive, or similar damages arising from or related to this agreement, including but not limited to loss of profits, revenue, data, or business opportunities, whether or not Josephine The Plumber LLC was aware of the possibility of such damages. This limitation applies to any claims, whether based on contract, tort (including negligence), or any other legal theory. These Terms and Conditions may be modified by Josephine The Plumber LLC at any time by posting the revised terms on [www.JosephineThePlumber.com](http://www.JosephineThePlumber.com) or by mailing them to the address provided in your registration form. By registering for the 7-Hour Periodic Gas Inspector Qualification course offered by Josephine The Plumber LLC, I agree to comply with these Terms and Conditions.

I, the student/participant, confirm that I have read this agreement thoroughly and fully understand its contents. I acknowledge that this is a legally binding contract between Josephine The Plumber LLC and myself, which includes a limitation of liability and a waiver of damages.

**Sign and Date**

**PLEASE READ AND SIGN THIS PAGE, RETURN IT WITH PAGE #2. You can email a copy to [info@JosephineThePlumber.com](mailto:info@JosephineThePlumber.com) - all originals must be mailed.**