



**Service, Repair and/or Installation License**  
**RENEWAL Application for Companies**  
*Occupational Licensing Division*  
[www.oklahoma.gov/labor](http://www.oklahoma.gov/labor)

**OKLAHOMA DEPARTMENT OF LABOR**  
 409 NE 28th St  
 Oklahoma City, OK 73105  
 405-521-6100/888-269-5353

<b>APPLICATION TYPE</b>	<b>APPLICATION FEE</b>	<b>Please make your Check, Money Order or Cashiers Check payable to ODOL</b>	
<input type="checkbox"/> Renewal	\$100.00	If license expired over 90 days, applicant must meet requirements for new issuance	
<b>APPLICANT INFORMATION</b>			
Company Name:		License #	Contact Person:
Mailing Address:	City:	State:	Zip Code:
Phone #: (    )		E-mail Address (REQUIRED):	
Owner's Name:			
Federal Employees Identification Number (FEIN):			
Physical Location of Plant or Shop (Business Applicants Only):			
<b>Please check appropriate boxes opposite the type of vessel you wish to install, service, and/or repair:</b>			
ASME Section I (power boilers)	INSTALL <input type="checkbox"/>	SERVICE <input type="checkbox"/>	REPAIR <input type="checkbox"/>
ASME Section IV (heating boilers)	INSTALL <input type="checkbox"/>	SERVICE <input type="checkbox"/>	REPAIR <input type="checkbox"/>
ASME Section VIII (pressure vessels)	INSTALL <input type="checkbox"/>	SERVICE <input type="checkbox"/>	REPAIR <input type="checkbox"/>
Is welding to be performed on any pressure part of items?    YES <input type="checkbox"/> NO <input type="checkbox"/>			
If welding is to be performed, refer to the Oklahoma Boiler and Pressure Vessel Safety Act (current as of January 14, 2019)---Rule 380:25-13-3, for additional requirements.			
Are you in possession of a current certificate of authorization for use of the ASME Code Symbol Stamp?    YES <input type="checkbox"/> NO <input type="checkbox"/>			
Are you in possession of a current certificate of authorization for use of the National Board "R" Stamp?    YES <input type="checkbox"/> NO <input type="checkbox"/>			
<b>If YES, list stamps and expiration dates and provide current copies of each.</b>			
STAMP	CERTIFICATE NUMBER	EXPIRATION DATE	
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	
_____	_____	_____	
Are you a Certified National Board (NB) or American Petroleum Institute (API) Owner/User? _____			
<b>MILITARY STATUS:</b>			
*Within the past six (6) months, have you been honorably discharged from the Armed Forces of the United States, coming off Active Duty as a member of the National Guard or Reserves, or transferred from another state to Oklahoma? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, provide date of discharge/transfer: _____			
*Are you a spouse of an active duty member of the Armed Forces of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No			
I certify all statements are true to the best of my knowledge and that all work shall be done in compliance with the State of Oklahoma boiler law, rules, and regulations adopted by the Oklahoma Department of Labor.			
<b>Company Official Signature / APPLICATION CANNOT BE PROCESSED WITHOUT A SIGNATURE AND FEE</b>			<b>DATE</b>

