## STATE OF MAINE DEPARTMENT OF PROFESSIONAL & FINANCIAL REGULATION OFFICE OF PROFESSIONAL & OCCUPATIONAL REGULATION

## MAINE FUEL BOARD

35 STATE HOUSE STATION AUGUSTA, ME 04333

TEL: (207)624-8627 EMAIL: fuel.board@maine.gov Maine Relay 711 (TTY)

## **CERTIFICATE OF SUPERVISION**

TO BE COMPLETED BY SUPERVISING MASTER

The Master is responsible for notifying the Maine Fuel Board when the journeyman is no longer under his supervision or responsibility.

Failure to notify the Board constitutes a violation of Board Rule.

Journeyman Information (please print)

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Name:				
Mailing Address:				
City:	State:		Zip Code:	
Su	pervising Master	· Information (plea	se print)	
Name of Supervising Master:		ü		
License Number:		License Autho	License Authority (i.e., 1 & 2 Oils Up to 15 gph):	
Company Mailing Address of S	Supervising Maste	r:		
City:	State:		Zip Code:	
Company Telephone Number:		Company Fax	Company Fax Number:	
The Master, by his signature,	affirms responsibili	ity of the journeyma	an's work ethics and workmanship.	
	Date:			
Signature of Supervising Mast	er			