

Plumbing License Application

Business Name: _____

Business Address: _____

Contact Telephone Number: _____

Make contact telephone number available to the public? Yes _____ No _____

Applicant Name: _____

Is hereby making application for a(n): Plumbing

Signature: _____ Date: _____

Please be sure to include the following information with your application:

_____ Application is signed by applicant

_____ Application fee of \$40.00 (1 year license) \$75.00 (2 year license)

_____ Proof of Insurance (\$1,000,000 liability insurance/surety bond requirement)

_____ Proof of Passing a Standard Exam for the determination of competency of plumbing contractors from International Code Council (ICC), International Assoc. of Plumbing & Mechanical Officials (IAPMO) or Prometric.

_____ Proof of 12 CEU hours biennially OR 6 CEU hours annually

Office Use Only: _____ License Number: _____

Proof of Insurance Attached: _____ Expiration Date: _____

Proof of Standard Exam: _____

Proof of CEU: (6 Hours Annually Required) _____

Payment Received: _____

Building Inspector Approval: _____ Date: _____