



**LICENSE REGISTRATION FOR PLUMBING CONTRACTORS**

Name of Business: \_\_\_\_\_

Licensed Responsible Contractor (as stated on your license)

\_\_\_\_\_

**This person must be present to register.**

Company Address \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone number: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

**You must present the following on the day of registration and every renewal date thereafter in order to pull a permit. If this information is not current you will not be able to pull a permit.**

License #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

License #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

License #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Insurance Expiration Date: \_\_\_\_\_

Employees allowed to pull permits on your license.  
**(You will be responsible for any work done by these people)**

Name \_\_\_\_\_ Title \_\_\_\_\_ Phone# \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ Phone# \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_ Phone# \_\_\_\_\_

**No more than three people at one time can pull permits on your license.**

Licensed Plumber Signature: \_\_\_\_\_ Date: \_\_\_\_\_