

**APPLICATION FOR REGISTRATION TO ENGAGE IN THE PLUMBING
BUSINESS AND INSTALL PLUMBING WITHIN THE JURISDICTION OF
WAYNE COUNTY
428 West Liberty
WOOSTER, OH 44691
1-330-264-2426**

Business Name
or Plumbing Installer _____

Contractor's or
Installer's Name: _____

Street Address: _____

City, State, Zip: _____

Phone: _____ Cell phone: _____ Pager: _____ Years of Experience: _____

Bond Company: _____ Bond Expires: / / _____

Email: _____ License _____

VALID REGISTRATION RENEWAL MUST BE SECURED PRIOR TO DECEMBER 31ST

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00 AND A COPY OF YOUR IN-EFFECT
BE SUBMITTED WITH THIS APPLICATION

d only on receipt of fee and bond copy.

APPLICANT _____
(Please print legibly)

APPLICANT _____ DATE _____
(SIGNATURE)

(Office Use Only)

REGISTRATION APPROVED _____

REGISTRATION NUMBER _____ YEAR _____

RECEIPT MAILED TO APPLICANT: BY: _____ DATE _____