

APPLICATION NO. _____

DATE _____

CITY OF JEFFERSON
PLUMBING CONTRACTOR LICENSE APPLICATION
2016

APPLICATION MUST BE COMPLETE AND SUBMITTED WITH
LICENSE FEE OF \$210.00 AT TIME OF ISSUE OR RENEWAL

INFORMATION ON THIS APPLICATION SHALL BE CURRENT, ACCURATE, AND LEGAL;
ANY CHANGE MUST BE REPORTED TO
THE CITY OF JEFFERSON, DEPARTMENT OF PLANNING & PROTECTIVE SERVICES,
WITHIN (30) THIRTY CALENDAR DAYS.

Please print or type information.

BUSINESS NAME: _____

ADDRESS: _____

CITY/STATE: _____ ZIP: _____

MAILING ADDRESS (If different than above): _____

CITY/STATE: _____ ZIP: _____

PHONE: (____) _____ OWNER'S NAME: _____

CELL: _____ CELL CARRIER (AT&T, US Cellular, etc): _____

EMAIL ADDRESS: _____ FAX: _____

MASTER PLUMBER'S NAME: _____ MASTER PLUMBER'S SIGNATURE: _____

MASTER PLUMBER'S BOND NUMBER: _____ EFFECTIVE DATE: _____

BONDING COMPANY: _____ BOND RENEWAL DATE: _____

PRIMARY TYPE OF BUSINESS: _____ COMMERCIAL _____ RESIDENTIAL _____ BOTH (Please circle one)