



WESTTOWN TOWNSHIP

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West Chester, PA 19382
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PLUMBING LICENSE APPLICATION

CERTIFICATE OF INSURANCE MUST ACCOMPANY THIS APPLICATION

I HEREBY MAKE APPLICATION FOR A () NEW () RENEWAL LICENSE TO ENGAGE IN AND CARRY OUT THE BUSINESS OF PLUMBING AND SANITARY DRAINAGE IN THE TOWNSHIP OF **WESTTOWN**, CHESTER COUNTY, PENNSYLVANIA, AS A MASTER PLUMBER OR JOURNEYMAN PLUMBER, IN ACCORDANCE WITH THE INTERNATIONAL PLUMBING CODE OF 2003 AND **WESTTOWN** TOWNSHIP ORDINANCES NO. 91-10 AND NO. 96-8.

APPLICATION FOR REGISTRATION AS A: () COMPANY () MASTER PLUMBER

ALL APPLICATIONS FOR A MASTER PLUMBER LICENSE, WHETHER A COMPANY OR INDIVIDUAL MUST BE ACCOMPANIED BY A CURRENT REGISTRATION, IN THE NAME OF THE INDIVIDUAL, FROM A FIRST OR SECOND CLASS TOWNSHIP, OR A THIRD CLASS CITY AND A COPY OF YOUR COMPANY STATE LICENSE. NO LICENSES WILL BE ISSUED WITHOUT THESE DOCUMENTS.

Trade Name _____ Business Phone _____

Business Address _____

City _____ State _____ Zip Code _____

General Liability Insurance Carrier _____

Policy Number _____ Expiration Date _____ Amount _____

Worker's Compensation Insurance Carrier (if exempt attach exemption form) _____

Policy Number _____ Expiration Date _____ Amount _____

Insurance Agent _____ Business Phone _____

Owner Name _____ Home Phone _____

Home Address _____

City _____ State _____ Zip Code _____

COMPANY – List names of each Master, Journeyman or Apprentice Plumber

I certify that I have a current license issued on _____ from the City, Borough or Township of _____
In addition, I also certify that the above statements are true and correct to the best of my knowledge.

Print Name

Signature of Applicant

Date

License Fees: () Company Registration \$75.00 () Master Plumber (Individual) \$35.00 () Yearly License Renewal \$25.00

Building Code Official _____ Date _____

REGISTRATION NUMBER _____