



CITY OF HAGERSTOWN, MARYLAND

Planning and Code Administration Department

Application for Master Plumber Registration

- Renewal** Fee is \$125.00 unless registration has lapsed more than 30 calendar days, then \$150.00
 New Fee is \$150.00

Master Plumber's Name: _____	
Name of Company or Business: _____	
Address of Company or Business: _____	

City of Hagerstown Registration Number: _____	Work Phone: _____
Expiration Date: _____	Fax Number: _____
State of Maryland License Number: _____	Cell Phone: _____
Expiration Date: _____	E-mail: _____
	Website: _____
Certificate of Insurance Policy Number: _____	
Expiration Date: _____	
Insurance Carrier: _____	

- There can be only one Master Plumber per company.
- Registration shall run biennially and expire June 30 of the odd calendar year. Registration Fees shall not be pro-rated.
- Any journeyman or apprentice license holders employed by your company must also be registered with the City of Hagerstown (applications for each license holder are required).

The following must accompany this application:

1. A copy of the Master's current State of Maryland Plumbing License
2. A certificate of insurance naming the City of Hagerstown as certificate holder
3. A photo I.D. (current valid driver's license or other photo identification)
4. Signed statement page (on reverse of this form), (if not signed in our office, then signature must be notarized)
5. Payment of fee

If contact person is someone other than license holder, please list below, or (if more than one, use back of form).

Name: _____

Association: _____

Office Phone: _____

Cell Phone: _____

E-mail: _____

These statements are part of the Master Plumber's License Registration. This form must be signed by the licensed applicant in person in the Planning & Code Administration Department, or the application must be notarized.

By signing below, I acknowledge:

1. I cannot allow my license to be used by a company other than indicated or for another individual.
2. I cannot begin installation of any plumbing work prior to obtaining a required permit.
3. I agree to abide by the City of Hagerstown Plumbing Code adopted by the Mayor and Council and am aware that violations may result in re-inspection charges, a suspended registration, and/or the issuance of municipal infraction citations.
4. The information contained in this application, is to the best of my knowledge and belief, true, correct, and complete.

Printed Name of Master Plumber

Signature of Master Plumber

Printed Name of Company or Business

Date

On this ____ day of _____, 20 ____, personally appeared _____ who executed the foregoing instrument, and acknowledged before me that same was executed for the purposes therein expressed.

(NOTARY STAMP)

Printed Name of Notary _____

Signature of Notary _____

STATE OF _____

My Commission Expires _____

COUNTY OF _____