



2009 Plumbing & Administration Permit Processing

Instructions to applicants: Complete form by filling in all information. Supporting documentation **MUST** accompany the signed application when submitted. Please submit the following:

- this completed application
- copy of the Illinois State Plumbers Contractor Registration
- copy of Apprentice Cards
- copy of C.C.C.D.I. Cards
- **\$50.00** check payable to the City of Bloomington for annual renewal.

NOTE: A penalty fee of \$25 will be accessed if not paid by February 1, 2009. (Does not apply to new applicants.)

Business Name:		Application Date:	
Business Address:		Phone #:	
		Mobile #:	
		Fax #:	
License Holder Signature:		E-mail:	
Print Name:			



NOTE: MAIL, DO NOT FAX, ALL MATERIALS TO:
CITY OF BLOOMINGTON – PACE DEPARTMENT
ATTN: PERMIT PROCESSING
P.O. BOX 3157, BLOOMINGTON, IL 61702-3157

ON OR BEFORE JANUARY 1, 2009

If business is a Corporation, provide name and title of officers:

Name	Title
1.	
2.	
3.	

Please check here if you are a minority or woman owned business and would like to receive an application to be on the approved Community Development Contractor's List.

Minority Owned **Woman Owned**

FOR OFFICE USE ONLY.

Reviewed By:	Applied:	/	/
(Plumbing Inspector)			(Date)

DO NOT FAX

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