



Plumber License Application

P.O. Box 790, 433 South First Street, Montrose, CO 81402
Phone 970-240-1420 / Fax 970-252-4720
www.cityofmontrose.org

Date of Application: _____

Name of Applicant: _____

E-Mail Address: _____

Business Phone: _____ Home Phone: _____

Name of Business: _____

Address: _____

Mailing Address: _____

Name of Manager: _____

Address: _____ Phone: _____

Signature of Applicant

QUALIFICATIONS APPROVED:

- Fee of \$25.00 paid: Cash / Check / Credit Card / Date Paid: _____
- Copy of Master Plumber License Provided: Yes / No Current / Expired

Notes for follow-up: _____

City Clerk (date)

A City of Montrose Plumber License expires on December 31st of the current year.