



# Plumber License Application

P.O. Box 790, 433 South First Street, Montrose, CO 81402  
Phone 970-240-1421 / Fax 970-240-1493  
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 \$40.00 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 31<sup>st</sup> of the current year.*