

Plumbing Registration Application

Marion Public Health
181 S. Main St. Marion, Ohio 43302



740-692-9118 mreale@marionpublichealth.org www.marionpublichealth.org

Business Name

State License #

Contractor or Installer's Name

Street Address

City, State, Zip

Email

Business Phone

Cell Phone

Fax #

Website

Backflow Certifier

Med Gas Certified (ASSE) 6110

Instructions

1. Complete registration form. Applicant's signature and date are required.
2. Surety Bond for a minimum of \$10,000.
3. Current Certificate of Insurance (proof of liability insurance)
4. Current copy of State of Ohio Plumbing License.
5. Submit \$100.00 Registration Fee. Check payments should be made payable to Marion Public Health

Applicant's Signature

Date

All plumbing contractors MUST supply a copy of their state OCILB license number and the holder of the state license for their business to register with our department and pull any permits.

*****REGISTRATIONS ARE DUE BY JANUARY 31ST, 2025 OR A LATE FEE WILL BE CHARGED*****

FOR OFFICE USE ONLY

Receipt # _____ Date Received: _____ Registration # _____