

**APPLICATION FOR REGISTRATION TO ENGAGE IN THE PLUMBING
BUSINESS AND INSTALL PLUMBING WITHIN THE JURISDICTION OF
CLINTON COUNTY HEALTH DISTRICT
111 S Nelson Ave Suite 1
WILMINGTON, OH 45177
937-382-3829**

Business Name
or Plumbing Installer _____

Contractor's or
Installer's Name: _____

Street Address: _____

City, State, Zip: _____

Phone: _____ Cell phone: _____ Pager: _____ Years of Experience: _____

Email: _____ License _____

2025 Plumber Registration

Registering for (check all that apply): _____ Residential _____ Commercial*
*If registering for commercial, a State of Ohio Plumbing License must be provided.

REGISTRATION FEE IS \$100.00 Registration expires December 31.

Free online access to the 2024 Ohio Plumbing Code are available on the International Code Council (ICC) Ohio eCode Bookshelf: <https://codes.iccsafe.org/codes/ohio> or another option is, Ohio Plumbing Code/Ohio Administrative Code 4101:3 can be viewed at: <https://codes.ohio.gov/ohio-administrative-code/4101:3>

I agree to comply with the rules and regulations of the Clinton County Health District Board of Health and Ohio Administrative Code Chapter 4101:3 governing the installation of plumbing. I have a copy of these rules and regulations and understand the provisions contained therein.

APPLICANT _____
(Please print legibly)

APPLICANT _____ DATE _____
(SIGNATURE)

(Office Use Only)

REGISTRATION APPROVED _____

REGISTRATION NUMBER _____ YEAR 2025

RECEIPT MAILED TO APPLICANT: BY: _____ DATE _____