



Public Health
Prevent. Promote. Protect.

**Butler County
General Health District**

For Plumbing:

Master Plumber and water line and/or sewer line Contractor registrations require a registration form be completed and require a registration fee. If doing Commercial work in Butler County, you must provide a copy of your Ohio State Plumbing License.

	Registration Fee
Master Plumber	\$100.00
Journeyman	\$25.00 each

All registrations will be non-transferable and will expire annually on the 31st day of December. When applying for the registration, individuals shall maintain and submit to the Butler County General Health District complete and accurate records and information for determining compliance with the rules.

PAYMENT:

In person payments can be made with a completed application along with a check, cash, money order or credit card. Credit cards can be accepted *in person only* and with a \$1.95 fee for any charge under \$83.00. Charges over \$83.00 will be charged a 2.35% fee. Payments via mail can be made with a completed application, check or money order mailed to:

Butler County General Health District
301 S. Third Street
Hamilton, OH 45011



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2022 Plumbing Registration Application

Use this application to request registration as a Plumber. In addition, Plumbers are required to register each Journeyman.

Please complete all of the following information, print name, sign and date below:

State License No. _____ License State: _____

Business Name: _____

First Name: _____ Middle Initial: _____ Last Name _____

Mailing Address: _____

City, State, Zip: _____

Phone: _____
Office Cell Fax

E-mail Address: _____

Please verify by using the checklist below that each required item is submitted or completed with your registration application.

- Plumber registration fee of \$100.00
- Journeyman Plumber registration fee of \$25.00 per Journeyman Plumber
- A Registered Plumber doing commercial work in Butler County, must provide a copy of their Ohio State License

Please check the box AND SUPPLY DOCUMENTATION if applicable

- Application completed in full
- Ohio license if applicable

List all Journeyman Plumbers, if applicable:

_____	_____
First Name	Last Name
_____	_____
First Name	Last Name
_____	_____
First Name	Last Name
_____	_____
First Name	Last Name
_____	_____
First Name	Last Name

Print Name

Signature

Date

For Office Use Only:

Registration Number: _____