

**Shelby County Inspectors Office
25 West Polk Street, Room 201
Shelbyville, Indiana 46176
Phone: 317-392-6480**

TO: PLUMBING CONTRACTORS

Enclosed is an application for Shelby County Plumbers' Certification for 2009. Please fill out you applications as soon as possible. This year the county will be licensing all plumbers (contractors, journeymen, and apprentices). Below is the price of the license per person:

CONTRACTOR	\$ 30.00 (same for renewal)
JOURNEYMAN	\$ 20.00 (same for renewal)
APPRENTICE	\$ 10.00 (same for renewal)

The permits are based on the approximate number of inspections required for each job. Each inspection will cost \$40.00. Plumbers could have up to 3 inspections depending on the type of job. Please call when dealing with commercial or industrial buildings to find the total cost of the permits.

MAKE CHECKS PAYABLE TO: SHELBY COUNTY INSPECTOR'S OFFICE

**RETURN TO: SHELBY COUNTY INSPECTORS
25 WEST POLK STREET, RM 201
SHELBYVILLE, INDIANA 46176**

If you have any questions, please call our office at (317) 392-6480.

Sincerely,

Mandi Walterman
Office Manager

Enclosure(s)

List of Information Needed

1. Application must be completed and signed.
2. State Plumbing license must be attached to application.
 - a. All contractors, journeymen, and apprentice must submit a copy of their state license.
3. A check must be enclosed for the appropriate amount.
 - a. \$30 for contractors, \$20 for journeymen, & \$10 apprentices

If all information is not enclosed, the county plumbing license cannot be issued.

If all information is not received, applications will be held and the plumbers will not be permitted to work in the county.

Fines will be assessed if plumbing contractors, journeymen, and apprentices are found working without the county plumbing license on file.

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Phone: 317-392-6480

Shelby County Plumbers' Certificate Application 2009

_____ CONTRACTOR	\$30.00 (same for renewal)
_____ JOURNEYMAN	\$20.00 (same for renewal)
_____ APPRENTICE	\$ 10.00 (same for renewal)

State Plumbing License Number: _____

Company Information:

Applicant's Name: _____

Company Name: _____

Company Address: _____

City/State: _____ Zip: _____

Company Phone#: _____ Fax: _____

Applicant's Information:

Applicant's Address: _____

City/State: _____ Zip: _____

Applicant's Phone: _____ Cell: _____

SIGNATURE OF APPLICANT

PLEASE MAKE CHECKS PAYABLE TO: SHELBY COUNTY INSPECTOR

RETURN TO: SHELBY COUNTY INSPECTOR'S OFFICE
25 WEST POLK STREET, ROOM 201
SHELBYVILLE, IN 46176

EVERY PLUMBER MUST BE REGISTERED IN SHELBY COUNTY

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FOR OFFICE USE ONLY

DATE : _____ COUNTY REGISTRATION NUMBER: _____

FEE: _____ CASH _____ CHECK# _____