

## MASTER PLUMBING LICENSE RENEWAL

*This form must be filled out & submitted with each renewal.*

**1. BOND IS NO LONGER NEEDED**

2. *Submit a copy of your driver's license.*

3. *All insurance Certificate should read:*

City of North Tonawanda  
216 Payne Ave Plumbing Department Room 12  
North Tonawanda, NY 14120

4. *Liability Ins. Certificate – MINIMUM of \$1,000,000*

*ACCEPTABLE FORMS: C-105.2 or U-26.3 or self-Insurance form or NYS WC Exempt Form NY State Waiver, DB-120.1 Dated within 1 yr. of date license is issued. NYS Disability Exemption Waiver form CE-200*

5. *Insurances can be Faxed to 695-8544 or emailed to Codeclerk@northtonawanda.org*

6. *Check in the amount of \$125.00 made out to City of North Tonawanda Treasurer.*

*PLEASE CHECK WHICH MAILING ADDRESS, YOU WANT YOUR LICENSE TO BE MAILED TO.  
P.O. Box Address will not be accepted*

Name: \_\_\_\_\_ Company: \_\_\_\_\_

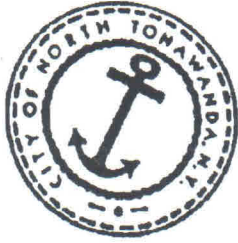
Address: \_\_\_\_\_ Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Cell: \_\_\_\_\_ Office phone \_\_\_\_\_

Email \_\_\_\_\_ Signature \_\_\_\_\_



## **JOURNEYMAN PLUMBING LICENSE RENEWAL**

- 1. Proof of working for master ( Letter or pay stub )**
- 2. Copy of your driver's License**
- 3. Current mailing address**
- 4. Current Phone and cell phone @ email**
- 5. \$75.00 license fee, Check made out to City of North Tonawanda Treasurer.**
- 6. LICENCE MUST BE RENEWED BY DECEMBER 31, 2016.**

**Mail to Plumbing Department 216 Payne Ave. North Tonawanda, NY 14120**

**Name & Address:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Cell:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Master Plumber:**

\_\_\_\_\_  
\_\_\_\_\_

**Company:**

\_\_\_\_\_  
\_\_\_\_\_

**Signature:**

\_\_\_\_\_  
\_\_\_\_\_

**Date**

\_\_\_\_\_  
\_\_\_\_\_

**Email**

\_\_\_\_\_