



**OFFICE USE ONLY**

LICENSE #: \_\_\_\_\_

# **PLUMBING - CONTRACTOR LICENSE APPLICATION**

Community Development Department · 1050 W. Romeo Road · Romeoville, IL 60446 · Tel. (815) 886-7200

**PLEASE NOTE: ALL CONTRACTORS WORKING WITHIN THE VILLAGE LIMITS MUST HAVE A CURRENT VILLAGE LICENSE AND KEEP CURRENT DOCUMENTS ON FILE. PLEASE MAIL OR EMAIL COPIES TO [BUILDINGINSPECTIONS@ROMEOVILLE.ORG](mailto:BUILDINGINSPECTIONS@ROMEOVILLE.ORG). FAX COPIES AREN'T READABLE**

Business Name:		
Mailing Address(no P.O. Box):		
City, State, Zip Code		
Phone #	Fax #	Cell #
Type of Contractor: <b>PLUMBING</b>		
Contact Name	Email Address:	

## **REQUIREMENTS:**

- **APPLICATION FEE: WAIVED**
- **COPY OF ALL PLUMBING LICENSE FROM THE STATE OF ILLINOIS**
  - **ILLINOIS DEPARTMENT OF PUBLIC HEALTH # 058**
  - **STATE OF ILLINOIS – DEPARTMENT OF PUBLIC HEALTH # 055**
  - **JOURNEYMAN PLUMBER'S LICENSE #**
  - **CHICAGO CONTACTOR LICENSE #**
- **CROSS-CONNECTION CONTROL DEVICE (IF APPLICABLE)**
- **IRRIGATION REGISTRATION (IF APPLICABLE)**

_____
Applicant's Signature
_____
Date of Application

Office use Only
Date of Issued: _____
Expiration Date: _____
Renewal #: _____