## **CLARK COUNTY COMBINED HEALTH DISTRICT (CCCHD)**



529 E. Home Road Springfield, Ohio 45503

(937) 717-2451, Ext. 251 Fax (937) 390-5625 E-Mail: rcahill@ccchd.com

or visit us at www.ccchd.com

County-Only Journeyman Plumber Registration 2024 (Excluding the City of Springfield & New Carlisle)

To register to work in <u>Clark County Only</u> for the year **2024**, you must pay a fee and fill out the information below.

Date of Application: \_\_\_\_\_

**Registration Fee: \$50.00** 

| Name               |                  | CCCHD Registration No. |       |     |
|--------------------|------------------|------------------------|-------|-----|
| Business Name/DBA  |                  |                        |       |     |
| Business Address   | City             |                        | State | Zip |
| Business Phone No. | Business Fax No. |                        |       |     |
| Cell Phone No.     | e-mail:          |                        |       |     |

Please send information to my home address listed below.

| Home Address   | City | State | Zip |
|----------------|------|-------|-----|
| Home Phone No. | ]    |       |     |

By signing this application, you agree to abide by any and all city and state laws and regulations and by the regulations set forth by the Clark County Combined Health District.

Signature

Date

Please note: Your current registration will expire on December 31