

# 2026 APPLICATION FOR REGISTRATION TO ENGAGE IN THE PLUMBING BUSINESS AND INSTALL PLUMBING WITHIN THE JURISDICTION OF THE DELAWARE PUBLIC HEALTH DISTRICT

470 S. Sandusky Street, Delaware, OH 43015  
Phone: (740)368-1700 Email: EH@delawarehealth.org

## INSTRUCTIONS

The Delaware Public Health District is now accepting 2026 Registration applications. The instructions below outline the items needed to complete the registration process. Once all documents are completed, you may bring the items to our office or return via mail per the address listed at the top of this application, or email EH@delawarehealth.org.

1. Complete application form. Applicant's signature and date are required.
2. Surety Bond for a minimum of \$5,000.00.
3. Certificate of Insurance (proof of liability insurance) for a minimum of \$250,000.00. Form must list Delaware Public Health District as the certificate holder along with the address of 470 S. Sandusky St. Delaware, OH 43015 and renewals must be on file before inspection services are received.
4. Current copy of State of Ohio Plumbing License. As per House Bill 487.
5. \$200.00 Registration fee due at time of application submittal. Check payments should be made payable to Delaware Public Health District. Online payments can be made at delawarehealth.org.

## COMPANY INFORMATION *PLEASE PRINT*

NAME OF COMPANY			STATE OF OHIO PLUMBING LICENSE#			OWNER/CONTACT		
MAILING ADDRESS								
CITY			STATE			ZIP		
BUSINESS PHONE			CELL PHONE			FAX #		
APPLICANT'S SIGNATURE			DATE			E-MAIL ADDRESS (all correspondence will be sent to this email)		

MEDICAL GAS CERTIFIED (ASSE) 6010

BACKFLOW CERTIFIER

### FOR OFFICE USE ONLY

Registration #: \_\_\_\_\_

Date Received: \_\_\_\_\_

Receipt #: \_\_\_\_\_

Date of Receipt: \_\_\_\_\_

Reviewed by/Date: \_\_\_\_\_

Received by: \_\_\_\_\_