Borough of Emmaus

Application for Master Plumber's License

Date: _____

To the Board of Sanitation:

I hereby make application for License to engage in or carry on the business of Plumbing and House Drainage in the Borough of Emmaus, as a Master Plumber.

Name of Firm Represented _____

Address of Firm _____

Name of Applicant _____

Address of Applicant _____

Any fraud in the application shall be sufficient cause for the refusal of the license and forfeiture of all fees paid.

Signed: _____

Reference:

Licensed Master Plumber: _____

City : _____

Date : _____

License No. : _____