

# CLARK COUNTY COMBINED HEALTH DISTRICT (CCCHD)

529 E. Home Road  
Springfield, Ohio 45503  
(937) 390-5600, Ext. 251 Fax (937) 390-5625 E-Mail: rcahill@ccchd.com

## County-Only Journeyman Plumber Registration 2010 (Excluding the City of Springfield & New Carlisle)

To register to work in **Clark County Only** for the year **2010**, 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.			

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 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