



QUEEN ANNE'S COUNTY PLUMBING BOARD

COUNTY OFFICE BUILDING

208 North Commerce Street

Centreville, MD 21617

Phone: 410-758-1271 Fax: 410-758-6602 cindy.gadow@maryland.gov

HVAC REGISTRATION

(\$30 FEE)

This is your application for your HVAC REGISTRATION for Queen Anne's County. Please complete the application below and sign. Return it to the above referenced address. **Please enclose your \$30.00 fee or call with Credit Card information after you submit your application. Please enclose a copy of your State of Maryland HVAC License (which must read "insured to contract work" required to apply for permits). Also a certificate of insurance made out to Queen Anne's County. (Certificate of insurance must have your name listed on it, along with the company name.)**

LICENSEE'S NAME _____

COMPANY NAME _____

MAILING ADDRESS _____

PHONE _____ FAX _____ CELL _____

E-MAIL ADDRESS _____ SIGNATURE _____

STATE HVACR LICENSE NO. – Master _____ *Master Restricted _____

*Those who hold a **State Master Restricted** License- You **may not** apply for a permit to do work in Queen Anne's County, that you are restricted from doing by your State License. List what work you are allowed to do: _____

ALLTRUCKS MUST DISPLAY YOUR NAME AND REGISTRATION NUMBERS BEFORE RENEWAL OF YOUR LICENSE. **I hereby certify under penalty of perjury that all my vehicles are/will be lettered as per State Code.** SIGNATURE _____ STATE LIC. NO. _____

*DO YOU HAVE A QUEEN ANNE'S COUNTY ELECTRICAL LICENSE? NO _____ YES _____

(IF YOU WANT TO APPLY FOR ONE CALL- Vivian Swinson at 410-758-4088)

IF YES, WHAT IS YOUR COUNTY ELECTRICAL LIC. # MASTER _____ LIMITED _____

***SEE ENCLOSED –New classes approved to obtain your low voltage electrical license. Please note if you know of classes that you feel would be appropriate please submit to the Plumbing Bd and we will forward to the Electrical Bd for approval.**

DO NOT WRITE IN SPACE BELOW _____

Q.A. COUNTY NO. _____ STATE LICENSE EXPIRES _____ Insured _____

DATE RECEIVED _____ INSURANCE EXPIRES _____

CHECK # _____ CASH _____ CREDIT CARD _____ RECEIPT # _____

(yellow paper)