

**2012 RESIDENTIAL FUEL GAS PIPING
CONTRACTOR'S REGISTRATION APPLICATION**

REGISTRATION FEE: \$100.00

Please Make Checks payable to: **LAKE COUNTY TREASURER & if mailing in, please
enclose a SELF-ADDRESSED, STAMPED ENVELOPE**

**A copy of a current State of Ohio License in either HVAC or Plumbing OR a copy of a
Current Registration with another City or County Building / Health Department must
be enclosed.**

Date: _____

Name of Applicant: _____

Home Address: _____, _____, _____, _____
Street City State Zip Code

Home Telephone Number: _____ Cell Phone Number: _____

Company Representing: _____

Business Address: _____, _____, _____, _____
Street City State Zip Code

Business Telephone Number: _____ Fax Number: _____

Please list **names of any additional personnel authorized** to obtain permits for the above company. If more space
is needed, please attach a separate sheet.

Please list your current registrations or licenses you hold in other communities:

PLEASE NOTE: This form must be notarized.

I subscribe that, if registered, I will abide by the provisions set forth in the code of building regulations
for the unincorporated areas of Lake County and the areas where the Lake County Building Department
has jurisdiction. I will obtain all necessary permits and required inspections including final inspections.
I will maintain a set of approved construction documents on site, and I will comply with all approved
construction documents, codes, and standards. This certificate of registration can be revoked at the
discretion of the Lake County Building Department for violations of the Building Codes or failure to
obtain permits and required inspections, or other just cause, including violations of the provisions of
this paragraph.

**FALSIFICATION OF A PUBLIC DOCUMENT IS A VIOLATION OF THE OHIO REVISED CODE,
SECTION 2921.13(A)(5), A MISDEMEANOR OF THE FIRST DEGREE, PUNISHABLE BY UP TO
SIX (6) MONTHS IMPRISONMENT AND A FINE OF \$1,000 OR BOTH.**

_____ **APPLICANT'S SIGNATURE**
*being duly sworn deposes and says that the information provided
herein is true and sufficiently complete so as not to be misleading.*
Applicant's Name
Subscribed and sworn before me this _____ day of _____ 20 _____

SEAL

_____ **NOTARY SIGNATURE**

NOTARY STAMP or PRINT NOTARY NAME _____
Expiration Date of Commission: _____ **Commission Recorded In:** _____

REGISTRATIONS ARE VALID FROM JANUARY 1ST - DECEMBER 31ST OF EACH YEAR.

2012 APPLICATIONS ARE BEING ACCEPTED AS OF December 01, 2011

Revised 11/2011