



PLUMBING CONTRACTOR INFORMATION

Information below is related to Building Permits OR Backflow applications with a Plumbing component.			
NAME OF CONTRACTOR		NAME OF BUSINESS (OPERATING AS)	
BUSINESS ADDRESS			
CITY		POSTAL CODE	
HOME PHONE	CELL PHONE	BUSINESS PHONE	FAX
E-MAIL ADDRESS (For Correspondence Purposes)			
DOES ANY PLUMBER HAVE A BACKFLOW TESTERS CERTIFICATE? YES / NO (Circle one)			
PLUMBER'S NAME:			
FOR OFFICE USE ONLY			
COMMENTS			
DATE RECEIVED		CUSTOMER NUMBER	

Information on this form is collected under the authority of Section 10(2) 11 of the Municipal Act, 2001, as amended and Chapter 326 of the City of Brantford Municipal Code, and will be used in the approval process for obtaining a Business Licence. This information is subject to the provisions of the Municipal Freedom of Information and Protection of Privacy Act. Questions about this collection of personal information should be directed to the Manager of Licensing & Administrative Services, 100 Wellington Square, Brantford, Ontario N3T 2M2 (519)759-4150.