

City of McFarland

518 Rock Island Rd * P.O. Box 183 * McFarland, KS 66501-0183 * (785) 765-2265 or Fax (785) 765-3700

Application for Plumbing / Electrical License

The undersigned _____

Of _____ hereby applies to the City of McFarland, Kansas Pursuant to Ordinance No. 189 for a plumbing license.

Applicant has had ____ years of plumbing experience. Applicant (will) / (will not) have employees performing plumbing services under his license.

Accompanying this application is the required \$15.00 fee and \$5,000.00 bond condition that applicant will comply with all ordinances of said city regulating plumbing and saving the city harmless from all damages to person or property resulting from any open excavation or from any operation with the city.

Signature of Applicant

* * * * *

License

The foregoing application and accompanying bond having been approved by the Governing Body of the City of McFarland, Kansas, said applicant is hereby issued a license to perform plumbing or electrical services in said city pursuant to the regulations of Ordinance No. 189 and all other ordinances of said city governing plumbing.

Dated this _____ day of _____, 2024.

Mayor

ATTEST:

City Clerk

(Seal)

LICENSE EXPIRES DECEMBER 31, 2025

(Must be executed in duplicate. Upon approval, the City keeps one copy and returns one to the applicant)