

INSTRUCTIONS: The Master Plumber or Landscape Irrigator must complete this form, provide his/her current master plumber license/landscape irrigator license, and a valid government issued identification. **First time registrations must be done in person. Renewals can be submitted via email.**

Master Plumber State License Number: _____
Endorsement: Medical Gas Multi. Residential Fire Sprinkler Specialist Water Supply Protection Specialist

Landscape Irrigator License Number: _____

LICENSEE INFORMATION		
First Name: _____	MI: _____	Last Name: _____
Home address: _____		
City: _____	State: _____	Zip: _____
Driver's License Number: _____	State: _____	Exp. Date: _____
Home Phone Number: (____) _____	Cell Phone Number: (____) _____	
Email: _____		

BUSINESS INFORMATION (must be same as business affiliation on state license and/or website)	
Company Name or DBA: _____	Business Phone: (____) _____
Mailing Address: _____	
City: _____	State: _____ Zip: _____
Email provided will be used to send important information: _____	

AUTHORIZED SIGNATURES TO PURCHASE PERMITS IN PERSON	
Please Provide Full Name as on Driver's License:	
1. _____	3. _____
2. _____	4. _____

REQUEST TO RETIRE A SIGNATURE	
Please Provide Full Name:	
1. _____	3. _____
2. _____	4. _____

LICENSEE SIGNATURE	
Licensee Signature: _____	Date: _____

PLUMBING INSPECTIONS CONTACT INFORMATION	
Phone Number: 832-394-8870	Physical Address: 1002 Washington Avenue, 4 th Floor
Email: hpcplumbingsection@houston.tx.gov	Mailing Address: P.O. Box 2688, Houston, TX 77252-2688

REGISTRATION FEES	
• MASTER PLUMBER LIC REGISTRATION	NO REGISTRATION FEE
• LANDSCAPE IRRIGATOR LIC REGISTRATION	\$61.67 (\$30.35 + \$31.32 ADMIN FEE)

FOR OFFICE USE ONLY	
Date: _____	Processed By: _____