

City of Seward BUILDING INSPECTION DEPARTMENT

Office 402-643-2928 Opt. 3 Opt. 1 PO Box 38, 142 N 7th St. Seward, NE 68434 sara.vancura@cityofsewardne.gov

Plumbers Licensing/Renewal Form 2025

Firm:			Address:		
City:	State:	Zip:	County:	Phone:	
Email Address:					
Insurance Agents Nam	e:		Ins.Co.:		
Address:				Phone:	
Owner/Master Name:					_ Fee: \$75.00
2nd Master Name:					_ Fee: \$75.00
3rd Master Name:					_ Fee: \$75.00
Journeyman Name:					_ Fee: \$50.00
Journeyman Name:					_ Fee: \$50.00
Journeyman Name:					_ Fee: \$50.00
Journeyman Name:					_ Fee: \$50.00
Apprentice Name:					_ Fee: \$ 1.00
Apprentice Name:					_ Fee: \$ 1.00
Apprentice Name:					
Date Sent:			To	otal Renewal Fee	S: