



**QUEEN ANNE'S COUNTY PLUMBING BOARD  
COUNTY OFFICE BUILDING**

**208 North Commerce Street  
Centreville, MD 21617**

**Phone: 410-758-1271 Fax: 410-758-6602  
cindy.gadow@maryland.gov**

**WATER CONDITIONER INSTALLER'S REGISTRATION**

**(\$30 FEE)**

This is your application for your **WATER CONDITIONER INSTALLER'S REGISTRATION** for Queen Anne's County. Please complete the application below and sign. Return it to the office of the Queen Anne's County Plumbing Board, County Office Building, 208 North Commerce Street, Centreville, MD 21617. **Please enclose your \$30.00 fee or call with Credit Card information information (must submit by 2:00p.m.). Please enclose a copy of your State of Maryland Water Conditioner Installer's / Well Driller's License and a certificate of insurance made out to Queen Anne's County. (Certificate of insurance must have your name listed on it, not just the company name.)**

**PLEASE MAKE CORRECTIONS, BE SURE TO FILL IN EACH LINE (put N/A if doesn't apply)**

WATER CONDITIONER INSTALLER \_\_\_\_\_

COMPANY NAME \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

\_\_\_\_\_ E-MAIL ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_ CELL \_\_\_\_\_

HAVE YOU HAD A QUEEN ANNE'S COUNTY REGISTRATION BEFORE? NO \_\_\_\_\_ YES \_\_\_\_\_

IF YES, WHAT IS YOUR QUEEN ANNE'S COUNTY REGISTRATION NUMBER? \_\_\_\_\_

Do you have a backflow certification? Certification # \_\_\_\_\_ Expires \_\_\_\_\_

**SIGNATURE** \_\_\_\_\_ STATE LICENSE NO. \_\_\_\_\_

**DO NOT WRITE IN SPACE BELOW**

Q.A. COUNTY NO. \_\_\_\_\_ STATE LICENSE EXPIRES \_\_\_\_\_

DATE RECEIVED \_\_\_\_\_ INSURANCE EXPIRES \_\_\_\_\_

CHECK # \_\_\_\_\_ CASH \_\_\_\_\_ CREDIT CARD \_\_\_\_\_ RECEIPT # \_\_\_\_\_