



Plumbing Representation Agreement

Date:
I/We: Plumbing Contractor Name
Designate: Representative Name
As our representative to sign for and purchase plumbing permits for the project at: Project Address:

Plumbing Contractor Name: Please Print Name
Plumbing Contractor Signature:
Contact Phone Number:
Contractors Board State License Number:
Representative Signature:

Per OAR 918-780-0600