



License # _____

100 W 4th Ave P.O. Box 129 Caney, Kansas 67333

Phone: (620) 879-2772 www.caneyks.com Fax: (620) 879-9808

Application for Plumber's License

Application Date _____

Applicant _____

Business Name _____

Business Address _____

Phone _____

E-mail Address _____

Driver's License No. _____

Federal Tax ID No. _____

Social Security No. _____

Signature and Date _____

The City of Caney requires a commercial general liability insurance policy issued by an insurance company authorized to do business in the State of Kansas in the minimum amount of \$500,000 per occurrence and in the general aggregate.

According to City Ordinance No. 946, a license is required if you are engaging in business for profit in the City of Caney.