

PLUMBING COMMISSION

217 W. Missouri Ave. c/o 1320 E Sioux Ave Pierre, SD 57501

Tel: 605.773.3429 Fax: 605.773.5405 SDPlumbing@state.sd.us

LICENSEE ROSTER OR PERMIT INFORMATION REQUEST FORM

Please submit the request form by mail to the address above. Include applicable payment in the form of a check, cashier's check, or money order. You may also remit your application via fax or mail with credit card information.

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

REQUEST TYPE

- Directory - (Excel Format)

Active Plumbing Contractor Licensees - \$20*

- Directory will include licensee name and email address (if provided by licensee)

Active Journeyman Plumber Licensees - \$20*

- Directory will include licensee name and email address (if provided by licensee)

Active Plumbing Apprentice Licensees - \$20*

- Directory will include licensee name and email address (if provided by licensee)

Purpose for Directory:

- Permit Information

List of permits for specified Plumbing Contractor (Excel Format) - \$20*

- Directory will include permit number and job location

List of permits for specified Plumbing Contractor (Redacted Photocopy of Original Permit- Mailed) - \$20*

- Directory will include permit number and job location

List of permits for specified Plumbing Contractor (Redacted Photocopy of Original Permit- Emailed)- \$20*

- Directory will include permit number and job location

Purpose for Permit Information:

** A fee of \$.25 per page for photocopies will be added to the \$20 fee for a data request. Pursuant to SDCL Chapter 1-27, if there are costs involved in the fulfillment of your data request, the Plumbing Commission will provide you with a time/cost estimate prior to moving forward with the data request.*