

**BUILDING DEPARTMENT
330-848-6730
FAX 330-848-6654**

GENERAL CONTRACTOR REGISTRATION APPLICATION

Fee: **\$125.00** Date Issued: _____ Receipt # _____ Ins Exp: _____

I hereby make application for Registration as a Licensed

I, _____
Print Full Name

Residing at _____
Address, City, & Zip Code

And an authorized officer representing _____ and doing
Company Name (if applicable)

Business at _____
Company Address, City & Zip Code

Phone # _____

To the contractor: In order to qualify for registration as a licensed contractor, you must fill out the application in full. The completed application must be accompanied by a **Liability Insurance Certificate in the amounts of \$300,000 for injury or death and \$100,000 property damage, with the City of Barberton named as an additional insured, and, a non-refundable fee of \$125.00 (Ordinance 32-2011)**

Signed: _____