

LICENSE NO. _____

REFERENCE NO. _____

CITY OF MENTOR-ON-THE-LAKE
5860 ANDREWS ROAD
MENTOR-ON-THE-LAKE, OHIO 44060
(440)257-7216 FAX (440)257-2766

APPLICATION FOR CERTIFICATE OF REGISTRATION

In compliance with Chapter 1452 of the Codified Ordinances, the following information is provided for contractor registration:

NAME OF APPLICANT:

DOING BUSINESS AS:

BUSINESS ADDRESS:

NUMBER AND STREET	CITY	STATE	ZIP
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TELEPHONE:

FEDERAL I.D. OR S.S. NO.:

FAX NUMBER:

BUSINESS ORGANIZATION:

- Corporation ()
- Partnership ()
- Proprietorship ()

Check the trade(s) for which registration application is being made:

- | | |
|----------------------------------|-----------------|
| General Building Contracting () | Underground () |
| Heating/Air Conditioning () | Roadway () |
| Electrical () | Plumbing () |

WORK EXPERIENCE AND EDUCATION:

Attach Bond Form in the amount of \$5,000, Insurance Certificate in the amount of \$100/300,000 liability and \$50,000 property damage for each registration. Fee is \$10 for each application. All registrations expire on December 31 of each year.

I/We hereby certify that I/We are familiar with the provisions of Chapter 1452 of the Codified Ordinances of the City of Mentor-on-the-Lake and are fully aware of the requirements of same. In the event that it is required to sublet work, it is agreed to engage only registered contractors, and that any misrepresentations of data or facts will be cause for refusal of a Certificate of Registration or revocation of same.

Date: _____

Signature of Applicant and Title