



Community Development
 Building Safety Division
 PO Box 3157
 Bloomington, IL 61702-3157

Phone: 309-434-2226
 TTY: 309-829-5115

2019 Sign Contractor Registration Renewal

Instructions to applicants: Complete form by filling in all information. Supporting documentation **MUST** accompany the signed application when submitted. Please submit the following:

- this completed application
- copy of Surety Company Permit Bond (\$5,000)
- copy of Liability Insurance, **\$100,000** for property damage, **\$300,000** for personal injury
- **\$100.00** check payable to the City of Bloomington for annual renewal.

Business Name:		Application Date:	
Business Address:		Phone #:	
		Mobile #:	
		Fax #:	
Liability Insurance Carrier (Name, Exp. Date):			
Surety Company Bond Carrier:			
Contractor Signature:		E-mail:	
Print Name:			

- Are you currently active in the City of Bloomington? Yes No
- Date of last job in the City of Bloomington. _____

Certificate of Insurance and Bond must accompany completed application form.



NOTE: MAIL, DO NOT FAX, ALL MATERIALS TO:

CITY OF BLOOMINGTON - PACE DEPARTMENT
ATTN: CONTRACTOR REGISTRATION
P.O. BOX 3157, BLOOMINGTON, IL 61702-3157

ON OR BEFORE DECEMBER 31, 2018

Please check here if you are a minority or woman owned business and would like to receive an application to be on the approved Community Development Contractor's List.

- Minority Owned
- Woman Owned

FOR OFFICE USE ONLY.

Reviewed By:	Card Issued:	/	/
(Building Inspector)	(Date)	(Exp. Date)	(Reg. #)

DO NOT FAX

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