2020 Contractor Registration Application

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 Liability Insurance, $100,000 for property damage, $300,000 for personal injury
- $100.00 check payable to the City of Bloomington for annual renewal.
- Roofing Contractors must include a copy of State Roofing License

NOTE: A registration card will be issued only upon arrival of all materials.

<table>
<thead>
<tr>
<th>Business Name:</th>
<th>Application Date:</th>
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<tbody>
<tr>
<td>Business Address:</td>
<td>Phone #:</td>
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<tr>
<td></td>
<td>Mobile #:</td>
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<td></td>
<td>Fax #:</td>
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<tr>
<td>Liability Insurance Carrier (Name, Exp. Date):</td>
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<tr>
<td>Contractor Signature:</td>
<td>E-mail:</td>
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<tr>
<td>Print Name:</td>
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Certificate of Insurance 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

Failure to renew by January 31, 2020, will result in a penalty fee of $50.00.

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

Check appropriate classification(s).

_____ Commercial/Business/Office Bldg.     _____ Concrete/Masonry     submit copy
_____ Residential Building              _____ Roofing - State License#:
_____ Demolition                          _____ Fire Protection
_____ Siding/Windows                       _____ Landlord
_____ Pools                                 _____ Other…

FOR OFFICE USE ONLY.

Classification: Contractor’s #:
Reviewed By: Card Issued: / /
(Building Inspector) (Date) (Exp. Date) (Reg. #)

DO NOT FAX