

CONTRACTOR'S LICENSE RENEWAL APPLICATION

Date: _____

APPLICATION FEE \$50.00

Eao Daid		Puilding (Building Official		
Approved	Denied	Reason: _			
	Remi	t Application an	d Payment To:	L OR IT WILL BE RETURNED	
Signature By The License Holder Only!!			Date		
	rs Compensation Insurance you s are for independent contractor				
Copy of Workman	Compensation State Exe	emption (if appli	able)	Attached	
Copy of Workman	Compensation Insuranc	e		Attached	
Copy of Insurance Liability and Property Damage				Attached	
Copy of Lake Coun				Attached	
NAME:	TITLE:		РНО	PHONE:	
NAME:		TITLE:	PHO	NE:	
NAMES OF PART	NERS OR CORPORAT	TION OFFICERS	(PLEASE LIST)		
IF BACKFLOW TES	TER: BACKFLOW TESTER	R	IDEM CARD OR S	TATE LETTER ATTACHED	
Contractor Number:		Corporation Number:			
	TRACTOR: *(Attach a c		-		
Protection, Signs, Sw Millwork, Low Voltag	vimming Pools, Foundation ge, Excavation, Fencing, Se	n, Waterproofing, E al-coating, Paving,	ecks, Painting, Flooring Mud-jacking, etc.	g, Landscaping, Gutters, Trim/	
		-	-	on, Roofing, Siding, Glazing, Fire	
License Type:	ype: General Plumbing HVAC Electrical Specialty				
E-mail					
Business Address			Zip		
Business Name			Business Phone		
Applicant Name			Phone		