



## CONTRACTOR'S LICENSE APPLICATION

### INSURANCE AND BOND REQUIREMENTS

All Contractor's performing work in the Town of Lowell, Indiana are required by State Law and Town Ordinance to have a Five Thousand Dollar (\$5,000) Unified License Bond be recorded in the Lake County Recorder's Office and a Certificate of Insurance before being submitted with the Contractor's Licensing Application Form. It is necessary to record the Unified License Bond but it is not necessary to record your Certificate of Insurance.

Areas covered under the insurance requirements are Property Damage and Personal Liability in the amount of Five Hundred Thousand Dollars (X\$500,000) for each occurrence, or an umbrella form of One Million Dollars (\$1,000,000)

Please Note: The Bond must read - The Board of Commissioners of the County of Lake, State of Indiana, and Cities and Towns in Lake County, IN.

Please Note: The Certificate of Insurance holder must be:  
The Town of Lowell  
501 E. Main Street  
Lowell, Indiana 46356

Bond and Insurance **MUST** state the scope of work

Make Check or Money Order payable to: The Town of Lowell

Please Note: All foreign corporations must submit a certificate of Authority from the Indiana Secretary of State. Their phone number is (317) 232-6576

Plumbers who possess a valid Indiana Plumbers License are not required to take a test, but they must be registered with the Licensing Division of the Town of Lowell in order to perform work in the Town of Lowell, Indiana. This also Applies to Licensed Well Diggers.

Please have your bond correct - your insurance company should be able to issue a Rider to correct any wording of your recorded bond.

I fully understand that any variations or false statements made in the affidavit shall constitute a cause for revocation of this permit and create the potential for legal action.

# INSTRUCTIONS FOR FILLING IN CONTRACTOR'S LICENSE FORM

1. Applicant's Name
2. Lake County License Holder (The person holding the current Lake County license) Position is the position they hold with the business applying for the license.
3. Business Name (Name of the business; can be the same as the above if the business carries the same name.
4. Business Address (Where you can be reached)
5. E-mail Address is required (business E-mail address)
6. Plumber's state registration number (must be supplied)
7. Type of License (check the appropriate type)
8. New License Fee
9. Check category, indicating whether an owner, individual, partnership or corporation
10. Give the names of individuals involved in your company
11. Attach a copy of a photo ID (driver's license, passport, state ID)
12. Attach a copy of the Recorded Unified License Bond
13. Attach a copy of Liability and Property insurance Policy
14. Attach a copy of your Worker's Compensation or Waiver
15. Length of service in contracting business
16. List any other contractor's Licenses you carry
17. If it pertains to you, fill it in
18. If it pertains to you, fill it in
19. Is your Recording Bond in effect
20. Check yes or no
21. Check yes or no
22. Complete this section in its entirety, your signature must be notarized

## FEE SCHEDULE FOR NEW CONTRACTOR'S LICENSE

CONTRACTOR'S LICENSE FEE	\$100.00
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# APPLICATION FOR CONTRACTOR'S LICENSE

1. Application/Owner Name: \_\_\_\_\_ Date: \_\_\_\_\_

2. Lake County License Holder or Test Applicant's Name: \_\_\_\_\_  
\_\_\_\_\_ Position: \_\_\_\_\_

3. Business Name: \_\_\_\_\_ Phone: \_\_\_\_\_

4. Business Address: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_

5. E-mail Address: \_\_\_\_\_

6. Plumber's state registration number: \_\_\_\_\_

Give Contractor's Number: \_\_\_\_\_

Give Corporation Number: \_\_\_\_\_

\* Attach copy of State Plumbing Cards

Back Flow IDEM # \_\_\_\_\_ and/or a copy of State Letter

7. License Type:

General Combination \_\_\_\_\_ General Residential \_\_\_\_\_ Specialty \_\_\_\_\_

(Please see list for type of Specialty and if TEST is required)

Please list type of specialty i.e. Electrical, Carpentry, Concrete, Masonry, Drywall, Insulation, Roofing, Siding Glazing, Fire Protection, Signs, Swimming Pools, Foundation, Waterproofing, Decks, Painting, Flooring, Landscaping, Gutters, Trim/Millwork, Low Voltage, Excavation, Fencing, Seal-coating, Paving, Mud-jacking, etc.

8. \_\_\_\_\_ License Fee (NEW) \$100.00

9. Owner \_\_\_\_\_ Individual \_\_\_\_\_ Co-Partnership \_\_\_\_\_ Corporation \_\_\_\_\_

10. Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_

11. One (1) Copy of Photo ID Attached \_\_\_\_\_

12. Copy of Recorded Unified License Bond Attached \_\_\_\_\_

13. Copy of Liability & Property Damage (Contractor) Insurance Attached \_\_\_\_\_

14. Copy of Worker's Compensation Insurance Attached \_\_\_\_\_

(If you do not have Workers Compensation Insurance you **MUST** have a copy of the waiver from the State of Indiana  
**PLEASE NOTE** Exemptions are for independent contractors only. If you have employees you **MUST** have workers compensation insurance.)

15. How long have you been engaged in the contracting business? Years \_\_\_\_\_

16. Do you hold any Contractors License in any other City or State? Yes \_\_\_\_\_ No \_\_\_\_\_

Where? \_\_\_\_\_

17. Have you ever been convicted in Indiana or any other state of obtaining money under false pretenses, extortion, forgery, embezzlement, or criminal conspiracy to defraud, filed bankruptcy or other like offences? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, explain the nature of the charge, date of conviction, court and location where convicted, sentence imposed and explain whether the sentence or disposition has been completed:

\_\_\_\_\_  
\_\_\_\_\_

18. Are you currently under indictment or charge by information for the offence of any of the above charges? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, explain the nature of the charge, date of conviction, court and location where convicted, sentence imposed and explain whether the sentence or disposition has been completed:

\_\_\_\_\_  
\_\_\_\_\_

19. Is your **Lake County Contractors Bond** in effect? Yes \_\_\_\_\_ No \_\_\_\_\_

20. Do you understand the **State of Indiana Building Codes**, required inspections AND required permits? Yes \_\_\_\_\_ No \_\_\_\_\_

21. Have you read and do you understand Lowell Town Ordinance 150.15 - 150.44 pertaining to Building Regulations? Yes \_\_\_\_\_ No \_\_\_\_\_

**22. Applicant Signature** \_\_\_\_\_

In whitness therof, I have hereunto subscribed my name this \_\_\_\_\_ day of , 20 \_\_\_\_\_, in the County of \_\_\_\_\_, State of \_\_\_\_\_.

Drivers License Number \_\_\_\_\_ State of Issue \_\_\_\_\_

\_\_\_\_\_  
**Notary Signature**