

Registration Number _____

Expires _____



1750 East Division Street Diamond, IL 60416

Phone: (815)634-8149 FAX: (815)634-3149

APPLICATION FOR CONTRACTOR'S REGISTRATION

Name of Business _____

Business Owner(s) _____

Date of Birth _____ Drivers License # _____

Business Address _____

City _____ State _____ Zip Code _____

Telephone No: _____ Cell No. _____

Type of Business _____ No. of Employees: _____

State License # (Plumber/Roofer attach copy): _____

E-Mail Address: _____

CONTACTORS FEES:

General Contractor (<i>\$20,000. Bid/Permit Bond Required</i>)	\$200.00	_____	_____
Sub-Contractor	\$100.00	_____	_____

Contractor Registration is valid for 1 year from date of issuance. You are responsible for ensuring that your Certificate of Insurance and/or State License remain current during the year registered in Diamond.

Please make checks payable to: Village of Diamond

CONTRACTORS INSURANCE REQUIREMENTS

ALL Contractors Must Provide a Certificate of Insurance in the following amounts:

- Bodily Injury Liability - \$1,000,000.00
- Property Damage Liability - \$1,000,000.00
- Workmen Compensation (*As required by the Industrial Commission of the State of Illinois*)
- Business Auto Bodily Injury Liability/Business & Auto Property Damage Liability - \$1,000,000.00/Combined Limit

I am familiar with the pertinent Village of Diamond Ordinances, Codes and Regulations, including the Building Codes applicable to Business, which I am engaged in and that I agree to fully comply with the same.

Signature of Owner or Authorized Representative