

Specialty Contractor Registration Form 2018

| PART 1. | Type of Certificate: | □ Pool Contractors | ☐ Roofers |
|--|--|--|---------------------------|
| | | Landscapers | Yard Sprinkler Installers |
| PART 2. | Applicant Information | : Complete in full. | |
| | Name | Address | Phone |
| Applicant or Contact Person Company | | | |
| Company | | | |
| E-mail Address | | | |
| PART 4. | □ Occupational/ Bu □ Proof of Worker's date. □ Proof of Surety Bu Applicant Signature: I certify that all statements here understand that false or incorre | Liability Certificate O ond: \$5000 (Made Pay ein are true and correct to the ect information provided by me | |
| Signature of Applicant | | | Date |
| | | FOROFFICEUSEONL | Y |
| Certifica | te approved by: | | |
| | Authorized Bu | uilding Official | Date |
| | \$25.00 Yearly Fee Ke checks payable to City of Harlen | | Amount |