Saugatuck Township

CONTRACTOR REGISTRATION FORM

(This form is required for contractors performing work in Saugatuck Township)

Company Name: _____

Licensee Name: _____

Mailing Address: _____

_____

City *State* *Zip Code*

Email: _____ **Phone:** _____

Federal Employer ID (or exemption): **Expiration:**		**Works Comp Carrier (or exemption):** **Expiration:**	
MESC (or exemption): **Expiration:**		**Liability Insurance:** **Expiration:**	
License Type	**Master License #**	**Contractor License #**	**Expiration Date**
Electrical			
Mechanical			
Plumbing			
Residential Builder			
Maintenance/Alter.			
Sign Specialty			

Submit this completed form along with a copy of your valid contractor's license(s) and any applicable fees to the Saugatuck Township office ($15 registration fee).

REGISTRATION WILL EXPIRE WHEN THE CONTRACTOR'S LICENSE(S) EXPIRES.

By signing below, I confirm:

1. The information on this form is accurate to the best of my knowledge.
2. I will submit permit applications for work requiring a permit, as mandated by State Law.
3. I will not begin work until all permit fees are paid and the permit documents are received.
4. I will schedule required inspections with at least 72 hours' notice.

_____

Signature of Applicant *Printed Name* *Date*

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