

# City of North Muskegon

1502 Ruddiman Drive North Muskegon, MI 49445  
Phone: (231) 744-1621 Fax: (231) 744-0367

## Contractor Registration Form

The following items are required to be submitted with this form:

- A copy of your current license
- Proof of liability insurance
- \$15.00 registration fee

### Contractor information:

Contractor Name \_\_\_\_\_ Address \_\_\_\_\_  
Contact Person \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_ Cell \_\_\_\_\_ Other \_\_\_\_\_  
E-mail address \_\_\_\_\_

### Employer and Insurance Information:

Federal ID# or SS# \_\_\_\_\_ State Employer ID# \_\_\_\_\_  
(or reason for exemption)  
Workers Comp Insurance # \_\_\_\_\_ Policy # \_\_\_\_\_  
(or reason for exemption)  
Liability Insurance Carrier \_\_\_\_\_ Policy # \_\_\_\_\_  
(required information)  
Date Policy was Issued \_\_\_\_\_ Date Policy Expires \_\_\_\_\_

### Licensee Information: (if different from above)

Licensee Name \_\_\_\_\_ Address \_\_\_\_\_  
E-mail Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_ Cell \_\_\_\_\_ Other \_\_\_\_\_

### License number and expiration date:

<b>Building</b> _____	_____	<b>Electrical</b> _____	_____
License Number	Expiration Date	License Number	Expiration Date
<b>Sign Installer</b> _____	_____	<b>Mechanical</b> _____	_____
License Number	Expiration Date	License Number	Expiration Date
<b>Alarm Installer</b> _____	_____	<b>Plumbing</b> _____	_____
License Number	Expiration Date	License Number	Expiration Date
<b>Excavator or Water/Sewer Line Installer</b> _____	_____		
	License Number	Expiration Date	

*I certify that all information submitted on this application is accurate to the best of my knowledge.*

Contractor Signature \_\_\_\_\_ Date \_\_\_\_\_

**Contractor must be registered with the City to receive a Building, Electrical, Mechanical or Plumbing Permit!**