CITY OF LOCKPORT ONE LOCKS PLAZA LOCKPORT, NEW YORK 14094

YEARLY	
FEE:	\$ 200.00 Cash or Check

LICENSE NUMBER:

APPLICATION FOR A CONTRACTOR'S LICENSE

NAME OF CONCERN OR CORP.		
BUSINESS ADDRESS		
BUSINESS PHONE	NUMBER OF YEARS IN BUSINESS	
NAME OF PRINCIPAL OWNER OR OWNERS		
ADDRESS		
HOME PHONE	DATE OF BIRTH	
APPROXIMATE NUMBER OF EMPLOYEES		
NAME OF INSURANCE COMPANY		

REQUIRED COVERAGE IN ORDER TO APPLY FOR LICENSE

\$300,000 LIABILITY COVERAGE	ACCORD FORM ACCEPTABLE
\$10,000 PROPERTY DAMAGE	ACCORD FORM ACCEPTABLE
COMPENSATION INSURANCE REQUIRED	C105.2 FORM
DISABILITY FORM	DB120 FORM

CERTIFICATE OF INSURANCE TO BE ISSUED TO CITY OF LOCKPORT

CHECK APPROPRIATE TYPES OF CONTRACTOR:

HOME IMPROVEMENT - ADDITIONS, DORMERS, ETC.

INTERIOR REMODELING EXTERIOR REMODELING OR SIDING, ETC.

_____ ROOFING OR GUTTERS

ELECTRICAL

____DRY WALL

____GARAGE

____SUB CONTRACTOR

CONCRETE DRIVEWAY

BLACKTOP DRIVEWAY

HEATING AND AIR CONDITIONING

____FENCE CONTRACTOR

____PLUMBING

OTHER

SIGNATURE OF APPLICANT

DATE