

2017 Registration  
**VILLAGE OF CARBON CLIFF**  
Contractor Registration Renewal Application

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**PART 1** Please fill in all information so that our records will be accurate. Be sure to let us know if any information requested is not applicable. Applications with blank information may be denied or have delayed approval.

Contractor Category:    Demolition    Electrical    Mechanical    Plumbing    Fire Protection  
                                   General /Roofing    General (No Roofing)    Other: \_\_\_\_\_

***Company Information***

Company Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Business Phone: \_\_\_\_\_  
Business Fax: \_\_\_\_\_  
E-Mail: \_\_\_\_\_  
Federal Tax ID #: \_\_\_\_\_  
State Tax ID#: \_\_\_\_\_

***Owner Information***

Owner Name: \_\_\_\_\_  
Owner Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Owner Cell: \_\_\_\_\_  
Form of Ownership: \_\_\_\_\_

***Primary Field Contact***

Contact Person: \_\_\_\_\_  
Contact Cell: \_\_\_\_\_

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**PART 2.** Please fill in the following information and submit copies so that we may retain them in our files

	Attached Copy
<b>Certificate of Insurance Expiration Date:</b> _____	<input type="checkbox"/>
<b>Date Bond was Issued:</b> _____	<input type="checkbox"/>
<b>Workman's Comp or Sworn Statement:</b> _____	<input type="checkbox"/>

**There is a \$60.00 REGISTRATION FEE PER CATEGORY required for all contractors  
Payable to the City of East Moline**

**Send to: City of East Moline -- 912 16th Avenue East Moline, IL 61244 -- ATTN: Inspections Department**

Registration Valid: January 1, 2017 through December 31, 2017

The undersigned certifies that all the information in this statement, and all information furnished in support of the statements are true and complete to the best of their knowledge and belief. Failure to comply with the conditions of this registration will result in revocation of the registration and cancellation of all active permits.

Signature \_\_\_\_\_

Date: \_\_\_\_\_

EM Office Only:   Date Payment Received: \_\_\_\_\_   Payment Method:   Cash \_\_\_\_\_   Check # \_\_\_\_\_

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**PART 3 OF THE APPLICATION IS ON THE REVERSE SIDE PLEASE BE SURE TO REVIEW**

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**Part 3.**

***Make sure the following information is accurate so that permits can be issued without delay. Cross out or add any additional persons you would like. For license holders please send in copies of licenses that are not listed or close to expiring.***

***Authorized to Pull Permits for Company***

*Please list the following representatives that are authorized to pull permits for your company:*

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**Licenses Required:**

**Please submit copies of current licenses for any of the categories marked on the front. Electrical and Mechanical contractors will need to provide licenses from other approved cities that provide testing.**

***Copies Attached***