Grove City Building Division
4035 Broadway
Grove City, OH 43123
614-277-3075
GroveCityOhio.gov

CONTRACTOR REGISTRATION APPLICATION

$100 Per Registration Type. Check each box that applies.

ALL REGISTRATIONS (with the exception of General Contractor) MUST PROVIDE ONE OF THE FOLLOWING:

☐ Columbus License ☐ State of Ohio License ☐ Passing score on Grove City-Approved Test

REGISTRATION TYPE ❑ New Registration ❑ Renewal

☐ General Contractor
General contractors can pull only the following permits:
RESIDENTIAL – new houses • COMMERCIAL – new buildings, remodels

☐ Concrete Forming and Placing & Finishing
☐ General Sign Contractor
☐ Medical Gas
☐ Swimming Pool
☐ Sewer Contractor
☐ Demolition
☐ Water Tapper
No registration fee, insurance or bond is required for water tapper but a current City of Columbus license and RITA tax form is required.

HOME IMPROVEMENT AND LIMITED CONTRACTOR REGISTRATION

☐ Home Improvement General Contractor

RESIDENTIAL:

☐ Roofing
☐ Siding, Windows and Doors
☐ Wood Deck Installation
☐ Basement Waterproofing
☐ Masonry Fireplaces
☐ Sidewalks and Driveway Approaches
☐ Fencing

OHIO CONSTRUCTION INDUSTRY LICENSING BOARD (OCILB) REGISTRATION

Must include a copy of your current State of Ohio License, along with all other documentation listed below.

☐ Electric ☐ HVAC ☐ Plumbing ☐ Hydronics ☐ Refrigeration

FIRE REGISTRATION

Must include a copy of your current State of Ohio License, along with all other documentation listed below.

☐ Automatic Sprinkler & Standpipe Systems
☐ Engineered Extinguishing Equipment (OTW)
☐ Fire Alarm & Detection Equipment
☐ Fire Service Mains
☐ Household Fire Warning Equipment Only
☐ Pre-Engineered Extinguishing Equipment (OTW)
☐ Fire Pumps

THIS REGISTRATION IS REVOCABLE OR MAY BE SUSPENDED IF THE TERMS AND CONDITIONS UNDER WHICH IT IS GRANTED ARE VIOLATED.
IT IS THE RESPONSIBILITY OF THE CONTRACTOR TO ENSURE LIABILITY INSURANCE, BOND AND STATE LICENSE(S) ARE UPDATED AND REMAIN VALID TO PREVENT DELAYS IN PROCESSING PERMITS AND INSPECTIONS. WORK SHALL NOT BE STARTED WITHOUT AN APPROVED PERMIT.

SUBMITTAL REQUIREMENTS

NOTE: Insurance, state and city license documentation must be provided before any registration is processed. No copies will be retained from previous years.

CERTIFICATE OF INSURANCE ($300,000 min. liability)
Certificate holder must be Grove City

Insurance Company: _____
Representative: _____
Phone: _____ Expiration: _____

$15,000 Bond (Signed & Sealed)
Continuation certificates accepted if original bond is on file with Grove City Building Division.

Bond Company: _____
Representative: _____
Surety Bond Amount: $15,000 required
Expiration: _____ Bond No.: _____

STATE LICENSE (for OCILB and Fire Contractors)

License No: _____ Expiration: _____
License Type: _____

CITY OF COLUMBUS LICENSE
(OCILB and Fire Contractors are exempt)

License No: _____ Expiration: _____
License Type: _____

- Test score (if required) from Grove City-approved testing facility: _____
- RITA Form 48 (City Tax) - See attached form

FEES

$100 Per Registration Type.

Quantity of Registrations _____
Multiplied by $100

Total Fees Due $ _____

OFFICE USE

Receipt # _____ ☐ Cash ☐ Card ☐ Check
Ref. # _____
Date Entered _____
Approved _____ Date _____

CONTRACTOR INFORMATION

Company Name _____
License Holder _____ Website Address _____
Address _____
City/State/Zip _____
Phone _____ Cell _____
Email _____
Federal I.D./SSN _____

Social Media Account Handles
@ _____
@ _____
@ _____
@ _____

Business Name _____ Expiration Date: _____ Registration No. _____

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ACKNOWLEDGEMENT OF CONTRACTOR REGISTRATION MINIMUM REQUIREMENTS

CONTRACTOR INFORMATION

Name _____ Date of Birth _____

RESIDENCE

Address _____

City/State/Zip _____

Phone _____

BUSINESS

Address _____

City/State/Zip _____

Phone _____

Dates of any previous registrations with Grove City Building Division _____

Is the applicant 18 years of age or older? ☐ Yes ☐ No Is the applicant a United States citizen? ☐ Yes ☐ No

Has the applicant been convicted of a felony? ☐ Yes ☐ No If yes, explain _____

_____

Does the applicant have a record of code violations? ☐ Yes ☐ No If yes, explain _____

_____

Has the applicant been sanctioned by any body for dishonest practice or malpractice? ☐ Yes ☐ No If yes, explain _____

_____

EXPERIENCE/EDUCATION/TESTING

All first-time registrations that don't include a state and/or Columbus license must include records of all available testing results as well as a statement of experience that includes all of the following items:

- List of employment or projects with dates of same
- Detailed work-related information about the employment or projects listed
- Length of time devoted to each such employment or project listed
- Name of the employer or other responsible person with direct knowledge of the quality of the work performed by the applicant
- Statement about the applicant's character by each such employer or responsible project manager
- Statement by the applicant of all schooling and training obtained by the applicant

Falsification of a public document is a violation of the Ohio Revised Code, section 2921.13(a)(3), a misdemeanor of the first degree, punishable by up to six months imprisonment and a fine of one thousand dollars ($1,000.00) or both.

NOTARIZED SIGNATURE

I, _____ attest that I meet the minimum experience requirements for contractor registration in the City of Grove City and that the information contained within this application an all attached documents is true and complete.

Signature of applicant _____ Date _____

Sworn to before me and subscribed in my presence this _____ day of _____, in the year _____.

Notary Public _____ My commission expires _____

NOTARY SEAL HERE

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ACKNOWLEDGEMENT OF CONTRACTOR REGISTRATION MINIMUM REQUIREMENTS

MINIMUM EXPERIENCE REQUIREMENTS BY CONTRACTOR TYPE

HOME IMPROVEMENT GENERAL CONTRACTOR

Applicant shall have a minimum of three full years experience in the home improvement field.

HOME IMPROVEMENT LIMITED CONTRACTOR

Applicant shall have a minimum of one full year of experience in the field for which the applicant is registering:

- Residential roofing
- Residential siding, windows and doors
- Residential wood deck installation
- Residential basement waterproofing
- Residential masonry fireplaces
- Residential fencing
- Residential sidewalks and driveway approaches
- Residential pools and spas

SEWER CONTRACTOR

The minimum experience required for an applicant shall be evidenced in writing and shall have been obtained in any of the following ways:

- Two consecutive full years of experience under the supervision of a City or other recognized jurisdiction's registered sewer contractor
- Three cumulative, nonconsecutive, full years of experience under the supervision of a City or other recognized jurisdiction's registered sewer contractor
- A current, valid registration as a sewer contractor in another recognized city, county or state
- Two full years of experience working on sewer systems

GENERAL SIGN CONTRACTOR

The minimum experience required for an applicant shall be evidenced in writing and shall have been obtained in any of the following ways:

- Two consecutive, full years of experience under the supervision of a City or other recognized jurisdiction's registered general sign contractor
- Three cumulative, nonconsecutive, full years of experience under the supervision of a City or other recognized jurisdiction's registered general sign contractor
- A current, valid registration as a general sign contractor in another recognized city, county or state
- Two full years of experience working on sign systems

DETERMINATION OF A FULL YEAR

A "full year" of experience, as required above, shall be based on 12 consecutive calendar months during which the applicant shall have been gainfully and verifiably employed for not less than 1,600 working hours at the specific craft, trade or profession for which an application for a Grove City Building Division-issued registration has been made.

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Grove City, OH 43123
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CONTRACTOR REGISTRATION BOND FORM

Bond No. _____ Date _____ **Amount $15,000**

KNOW ALL MEN BY THESE PRESENTS:

That (Licensee/Certificate Holder) _____

of (Company Name) _____

as Principal and (Bond Company) _____

as Surety, are held firmly bound unto the City of Grove City, Grove City c/o City Treasurer for the General Fund, City of Grove City, 4035 Broadway Grove City, OH 43123, as Obligee, in the sum of Fifteen Thousand and no/100th Dollars ($15,000.00) to be paid to said Obligee City, its successors and assigns, and for the payment thereof well and truly to be made, we, Principal and Surety, jointly and severally bind ourselves, our heirs, executors, administrators, successors, and assigns firmly by these presents. The conditions of the above obligation are such that:

WHEREAS, the above principal has or is about to apply to said Obligee for a license/registration as a, (**all registration types must be listed**)

_____ Contractor

for the term commencing this date and ending (MO/DAY/YR) _____, pursuant to GROVE CITY CODIFIED ORDINANCES, Chapter 1377.06, 1377.04 & 1375.06, May 16, 2002 as applicable.

WHEREAS, Principal, his agents and employees shall save the City harmless from all loss and damage to persons or property which may be occasioned in any way, by accident or the want of care or skill on applicant's part, in the prosecution of the work contracted, performed, pursued or attempted under such license/registration.

NOW THEREFORE, if the license/registration shall be issued to Principal, his agents and employees shall save the City harmless from all loss and damage to persons or property of the City and aforesaid, then this obligation shall be void; otherwise, the same shall remain in full force and effect.

IT IS FURTHER AGREED AND UNDERSTOOD that the Surety Company reserves the right to cancel this bond by giving 30 days written notice to Obligee c/o Administrator for The Building Division, Grove City, OH 43123, upon receipt of such cancellation notice, Surety Company is relieved of any further liability. The Surety Company will be liable for loss accruing up to the effective date of said cancellation notice, but in no event to exceed said $15,000.00

Signed this _____ day of _____, in the year_____

Licensee/Certificate Holder_____By _____
Print or Type Name *Must be signed (Signature)*

Surety _____ By (Attorney-in-fact) _____
Print or Type Name *Signature*

SEAL

FORM 48

Regional Income Tax Agency
Business Registration Form

RITA
REGIONAL INCOME TAX AGENCY

800.860.7482
TDD 440.526.5332
ritaohio.com

Grove City
Municipality

Access ritaohio.com to register electronically using MyAccount. Login to MyAccount to Add a Municipality or Add Subcontractor. These features allow you to report a new location or new subcontractor project electronically.

Business Type

- ☐ Corporation
- ☐ S-Corp
- ☐ LLC
- ☐ Partnership
- ☐ Non-Profit
- ☐ Estate & Trust
- ☐ Sole Proprietor / LLC

Reason for Registration

- ☐ Courtesy withholding for an employee's resident municipality
- ☐ Doing business within the municipality this year (temporary)
  - Approx. # of days _____ Start Date _____
- ☐ Business with a fixed location
  - Date business began at this location _____

Company Information (List physical address of work performed within this municipality)

Name: _____

Address: _____

City/State/Zip: _____

Federal ID #: _____

SSN : _____
(required if sole proprietor)

Mailing Address (for withholding tax forms / if different from above)

_____

_____

Mailing Address (for net profit tax forms / if different from above)

_____

_____

***Please note that your Federal Identification Number will serve as your RITA account number.**

Filing Status:

☐ Calendar year ☐ Fiscal year / month ending _____

Do you have any employees? ☐ Yes ☐ No

Number of employees at RITA location _____

My withholding is filed under a 3rd party account (PEO or common paymaster) ☐ Yes ☐ No

If yes, list Federal ID # _____

Monthly gross payroll at RITA location $ _____

I am a small employer (under $500,000 in gross revenue during previous year) ☐ Yes ☐ No

Contractors

I am a contractor ☐ Yes ☐ No

Will you be using sub-contractors? ☐ Yes ☐ No

If yes, complete page 2.

Total contract amount of the project $ _____

The Information Hereby Submitted is True and Correct.

Print Name _____ Title _____ Phone Number _____

Signature _____ Date ____/____/____

Please complete and sign this Registration Form and return within 10 business days. Please be advised that failure to timely register with RITA may result in delays in the processing of any required income tax filings or may result in future penalty and interest charges, if applicable. If you have any questions please contact the Registration Department at the number below.

Mail to: RITA
ATTN: BUSINESS REGISTRATION
P.O. BOX 477900
BROADVIEW HEIGHTS, OH 44147-7900

ritaohio.com

Call: 800.860.7482, ext. 5008
TDD: 440.526.5332
Fax: 440.922.3536

Sub-contractor Name / Address		
	Contact Name	$ Contract Amount
	Phone Number	Estimated Start Date
	EIN or Social Security #	Trade

Sub-contractor Name / Address		
	Contact Name	$ Contract Amount
	Phone Number	Estimated Start Date
	EIN or Social Security #	Trade

Sub-contractor Name / Address		
	Contact Name	$ Contract Amount
	Phone Number	Estimated Start Date
	EIN or Social Security #	Trade

Sub-contractor Name / Address		
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Sub-contractor Name / Address		
	Contact Name	$ Contract Amount
	Phone Number	Estimated Start Date
	EIN or Social Security #	Trade

Sub-contractor Name / Address		
	Contact Name	$ Contract Amount
	Phone Number	Estimated Start Date
	EIN or Social Security #	Trade

*If more space is needed, you may attach a separate schedule that includes ***ALL*** of the required information listed above.