

VILLAGE OF NEW WATERFORD
3760 Village Drive, P.O. Box 287
New Waterford, Ohio 44445
Phone: 330-457-0733 Fax: 330-457-9497

Shane Patrone
Mayor
Dave Slagle
Fiscal Officer

Jason Gorby
Village Administrator
Dan Haueter
Chief of Police
Greg VanPelt
Fire Chief

REGISTRATION OF CONTRACTORS

Requirements

Village of New Waterford Ordinance No. 2005-11-08 requires that any person, firm or corporation who provides construction, alteration, removal, demolition or equipment installation services within the Village of New Waterford be licensed. Permits will not be issued to unlicensed contractors and work performed by unlicensed contractors will be stopped immediately.

The Ordinance affects contractors involved in the building, constructing, altering, repairing, painting, moving, demolition, plastering, masonry work, roofing work, paving, fencing and landscaping as well as contractors who provide electrical, plumbing, heating and air conditioning.

Exceptions

Owners performing construction on property owned by him/her do not require a license. Contractors who perform work without charge for individuals or charitable organizations do not require a license.

Application

Application forms are also available at the Village Community Center. Completed application forms must be submitted with fifteen dollars (\$15.00) license fee, and proof of liability insurance.

**VILLAGE OF NEW WATERFORD
COLUMBIANA COUNTY, OHIO**

Date Received: _____ Application Number: _____

Review Date: _____ Receipt Number: _____

Registration date: _____ Paid check/cash: _____ Amt. _____

_____ for office use only _____

Contractor License Application

If submitting application by mail please include a self addressed, stamped envelope.
Applications missing required documents or information will be returned.

Requirements

1. Application completed and returned
2. Proof of liability insurance
3. Fee \$15.00(fifteen dollars)
4. If licensed contractor - copy of certification from the State of Ohio.

Applicant: (company name) _____

Address: (street, city, state, zip)

Phone: _____ Cell/Beeper: _____ Fax: _____

Fed. I.D.# or SS#: _____ Contact Name: _____

Check one:

- | | | |
|--|--|---|
| ☐ Builder New Homes | ☐ Carpenter/Handyman | ☐ Concrete/Masons/Paving |
| ☐ Fence/Utility Bldgs. | ☐ Electrical (requires certification) | |
| ☐ General/Remodeler/ Pools | ☐ Garage/Door Openers | ☐ HVAC (requires certification) |
| ☐ Demolition/Excavation | ☐ Radon Systems | ☐ Plumber (requires certification) |
| ☐ Waterproofing/Sewer | ☐ Landscaping/Irrigation Systems/Tree Service | |
| ☐ Security/Fire/Communication Systems/Low Voltage | | |
| ☐ Exterior Home Improvement (Window & Door/Painting/Roofing/Siding/Gutters/Insulation satellite dish, etc.) | | |
| _____ Other (ie.. Pool, sign, lead abatement, asbestos removal) | | |

CIRCLE ONE: Corporation Partnership Sole Proprietor

If a corporation, answer the following:

President's name: _____

Statutory Agent: (name and address) _____

List other municipalities that your company is registered in: _____

I certify that I have read and understand the above information and that I have answered the questions truthfully to the best of my knowledge.

Signature of Applicant

Date