



VILLAGE OF STEELEVILLE
APPLICATION FOR CONTRACTOR'S LICENSE
INFORMATION CONTAINED HEREIN IS CONFIDENTIAL

☐ New Application ☐ Renewal ☐ New Owner ☐ Change of Address or Ownership

BUSINESS INFORMATION

Business Name (DBA) _____ Business Phone _____

Business Address _____

City _____ State _____ ZIP Code _____

E-Mail _____ Fax _____ Website _____

Business Type: ☐ Corporation ☐ LLC ☐ Sole Proprietor ☐ Partnership
 ☐ Non-for-Profit ☐ Government

Type of Contractor _____

Number of Vehicle Tags Needed _____ (will mail up to two, additional tags available at Village Hall)

Send Form and Certificate of Insurance to:

Village of Steeleville
107 West Broadway
Steeleville, IL 62288
or Fax: 618-965-9479

Responsible Managing Individual (Officers, Directors, Job Foreman, Supervisor)

Name _____

Address _____ City _____ State _____ Zip _____

Phone _____ Fax _____ Mobile _____

Business Owner Name _____

Address _____ City _____ State _____ Zip _____

Phone _____ Fax _____ Mobile _____

Complete back side→

Date _____