



PLANNING & ZONING

705 N. Main Street, Walbridge, Ohio 43465 | kamstutz@walbridgeohio.org | (419) 666-1830

CONTRACTOR REGISTRATION

New Registration _____ Re-Register 20_____

Name of Contractor / Tradesman: _____ Date: _____

Contact Name & Title: _____

Business Address: _____

Phone: _____ Fax: _____ Mobile: _____

Email: _____ Website: _____

Federal EIN#: _____ or last 4 of SSN or Sole Proprietorship: _____

PLEASE CHECK THE TYPE OF WORK YOU ARE QUALIFIED TO PERFORM:

_____ Carpentry	_____ Electrical	_____ Excavation	_____ Fence
_____ General	_____ HVAC	_____ Hydronic	_____ Home Improvement
_____ Masonry	_____ Paving	_____ Plumbing	_____ Ponds/Pools
_____ Refrigeration	_____ Roofing	_____ Sewer	_____ Siding
_____ Signs	_____ Other	_____ Windows/Doors	

How many years' experience do you have doing this type of work as indicated above?

_____ years

Do you have subcontractors? _____ Yes _____ No

****If yes, each subcontractor must complete a CONTRACTOR REGISTRATION FORM.***



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If you are an Electrical, HVAC, Hydronics, Plumbing, or Refrigeration contractor, you will need to **attach a copy of your State of Ohio registration / license.**

PROOF OF LIABILITY INSURANCE IS REQUIRED from ALL contractors who perform work in the Village of Walbridge. Please provide a COPY of your Certificate of Insurance.

Does your company have previous or pending claims or findings for recovery issued by the Ohio State Auditor or other authorities? ☐ Yes ☐ No

If the information on this form is found to be satisfactory, a Certificate of Registration will be issued.

Certificate of Registrations are valid for one (1) calendar year at the cost of:

Original Registration	\$30.00
Annual Registration	\$15.00

Per the Village of Walbridge Codified Ordinance [#], the Village has the right to deny a registration if the applicant fails to provide all information requested and/or does not meet the standards set in place on the application. The applicant may appeal the Board of Zoning Appeals. Whoever shall fail to register or conduct business in violation of the registration requirements herein or violate any provision of this chapter shall be subject to a doubled original registration fee. Failure to renew shall result in an original fee.

This form **MUST BE SIGNED** by an authorized person.

NAME OF COMPANY: _____

PRINT YOUR NAME & TITLE: _____

SIGNATURE: _____ **DATE:** _____