



Village of Walton Hills

Building Department

7595 Walton Road
Walton Hills, Ohio 44146
(440)786-2970 • FAX (440) 232-4070
www.waltonhillsohio.gov

APPLICATION FOR 2012 CONTRACTOR REGISTRATION CHAPTER 1446

PLEASE type or print all information in ink (SO WE CAN READ IT). Incomplete applications will be returned and will delay processing.

Application Date: _____ Owner/President Name: _____

Company Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Phone #: _____

Alternate Phone #: _____ TAX I.D. # _____ Workers Comp. #: _____

<p>Contractor registration for the following REQUIRES state licensing. Attach copy and indicate number.</p> <p><input type="checkbox"/> Electrical # _____</p> <p><input type="checkbox"/> Plumbing # _____</p> <p><input type="checkbox"/> Fire Protection # _____</p> <p><input type="checkbox"/> Refrigeration # _____</p> <p><input type="checkbox"/> Hydronic # _____</p> <p><input type="checkbox"/> HVAC # _____</p>	<p>The following <u>do not require state licensing</u>:</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Carpenter</td> <td><input type="checkbox"/> Concrete/Masonry</td> <td><input type="checkbox"/> Demolition</td> </tr> <tr> <td><input type="checkbox"/> Excavating</td> <td><input type="checkbox"/> Exterior Sewer</td> <td><input type="checkbox"/> Fence</td> </tr> <tr> <td><input type="checkbox"/> General</td> <td><input type="checkbox"/> Glazing</td> <td><input type="checkbox"/> Handy Man</td> </tr> <tr> <td><input type="checkbox"/> Insulation</td> <td><input type="checkbox"/> Landscape/Snowplowing</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Low Voltage</td> <td><input type="checkbox"/> Other</td> <td><input type="checkbox"/> Painting</td> </tr> <tr> <td><input type="checkbox"/> Paving</td> <td><input type="checkbox"/> Plaster/Drywall</td> <td><input type="checkbox"/> Roofing</td> </tr> <tr> <td><input type="checkbox"/> Security Alarm</td> <td><input type="checkbox"/> Siding</td> <td><input type="checkbox"/> Sign</td> </tr> <tr> <td><input type="checkbox"/> Swimming Pool</td> <td><input type="checkbox"/> Tree Service</td> <td><input type="checkbox"/> Waterproofing</td> </tr> </table>	<input type="checkbox"/> Carpenter	<input type="checkbox"/> Concrete/Masonry	<input type="checkbox"/> Demolition	<input type="checkbox"/> Excavating	<input type="checkbox"/> Exterior Sewer	<input type="checkbox"/> Fence	<input type="checkbox"/> General	<input type="checkbox"/> Glazing	<input type="checkbox"/> Handy Man	<input type="checkbox"/> Insulation	<input type="checkbox"/> Landscape/Snowplowing		<input type="checkbox"/> Low Voltage	<input type="checkbox"/> Other	<input type="checkbox"/> Painting	<input type="checkbox"/> Paving	<input type="checkbox"/> Plaster/Drywall	<input type="checkbox"/> Roofing	<input type="checkbox"/> Security Alarm	<input type="checkbox"/> Siding	<input type="checkbox"/> Sign	<input type="checkbox"/> Swimming Pool	<input type="checkbox"/> Tree Service	<input type="checkbox"/> Waterproofing
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THE FOLLOWING IS A CHECKLIST OF THE REQUIRED FORMS AND INFORMATION:

- \$10,000 bond on Walton Hills bond form w/Power of Attorney **required**. Bond term thru December 31. USE **ONE BOND** FOR MULTIPLE REGISTRATIONS. **INDICATE ALL TRADES ON ONE BOND FORM.**
- Certificate of insurance, minimum \$500,000 bodily, \$500,000 property, \$1,000,000 aggregate each.
- Date insurance expires on: _____
- Village of Walton Hills named as Certificate Holder.
- Provide State of Ohio Worker's Compensation number and Federal Tax ID Number.
- Enclose \$100.00 for the FIRST registration and \$25.00 for each additional registration.**
- Enclose a self addressed stamped envelope.
- DO NOT SEND CASH.** Make checks payable to: Village of Walton Hills.

I have read and completed this application in full. The acceptance of this contractor registration herein applied for shall constitute an agreement on my/our part to abide by all conditions herein contained and also to comply will all ordinances set forth by the Village of Walton Hills and the laws of the State of Ohio relating to the work to be done and said agreement is a condition of said registration. I ALSO UNDERSTAND I MAY BE FINED AND OR MY REGISTRATION MAY BE REVOKED FOR FAILURE TO CALL FOR INSPECTION(S), FAILURE TO CORRECT VIOLATIONS, STARTING ANY WORK WITHOUT FIRST OBTAINING A PERMIT OR OBTAINING A PERMIT FOR ANOTHER PARTY.

Signature of:

Owner/President: _____ Print Name: _____

Individual: _____ Date: _____