



VILLAGE OF MOUNT PROSPECT
50 SOUTH EMERSON STREET
MOUNT PROSPECT, IL 60056
(847) 870-5675 phone
(847) 870-6620 fax

CONTRACTOR LICENSE APPLICATION

INSTRUCTIONS:

Please Type or Print clearly and complete **ALL** portions of the application

Business Legal Name _____

Business Address (PO Box not acceptable) _____ (apt/ste) _____

City/State/Zip Code _____

Billing Address (If Different Than Above) _____

City/State/Zip Code _____

Business Phone _____ Business Fax _____

Business Email _____

Type of Contractor (check one):
 Alarm General Landscape Plumbing
 Signs Electrical HVAC Masonry
 Roofer Other _____

FOR VILLAGE USE:
_____ NEW CONTRACTOR
_____ EXISTING/RENEWAL
LICENSE # _____
DATE ISSUED ____/____/____
FEE \$50.00
STATE LICENSED PLUMBERS, FIRE ALARM, FIRE SPRINKLER & ROOFERS PAY NO FEE
AMOUNT PAID \$ _____
CHECK # _____
Drivers License Attached? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
State License Attached? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
State Registration Attached? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A
City Registration Attached? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A

Plumbers, Roofers, Alarm, and Sprinkler Contractors MUST attach a copy of your State License - (Plumbers 058 or "J" number)

City of Chicago* or State License Number _____ (ATTACH COPIES)

Plumbers MUST also provide a copy of their current State Plumbing Contractor Registration - (055 Number)

State Plumbing Contractor Registration _____ (ATTACH COPY)

Electricians MUST provide a copy of a current City Registration - (ATTACH COPY)

OWNERSHIP TYPE AND CONTACT INFORMATION (Physical Address must be used, a Post Office Box is not acceptable)

If **Sole Ownership**, list information for the sole owner/operator and provide **Drivers License Number**
 Drivers License Number _____ (Must attach copy of State Issued Identification)

If **Corporation**, list information for the President or Chief Financial Officer and provide **Illinois Business Tax ID Number**
 Illinois Business Tax ID Number _____

First Name: _____ M.I. _____ Last Name: _____ Date of Birth: _____

Residence Address _____ City/State/Zip Code _____

Residence Phone _____ Email _____

SURETY BONDS AND CERTIFICATES OF INSURANCE ARE NOT REQUIRED

*Plumbers only



-Please Complete and Sign Below-

BACKGROUND

Have any of the persons listed ever been convicted of a felony? Yes No
If yes, please explain in box below.

Has the applicant ever had any license issuance or renewal refused or revoked by any state, other municipality, governing body or licensing authority? If yes, please explain in box below. Yes No

Explanation:

ACKNOWLEDGEMENT

I have read and understand the following statement: Yes No

BY ACCEPTING A PERMIT FROM THE BUILDING DIVISION, YOU ARE ENTERING INTO A CONTRACT WITH THE VILLAGE OF MOUNT PROSPECT THAT REQUIRES YOU TO FOLLOW THE CONSTRUCTION SITE MAINTENANCE GUIDELINES (ORD. 5536, 1/17/06) AND FOLLOW OUR TREE PROTECTION PLAN (CODE SEC 9.716). THE VILLAGE CODE CAN BE ACCESSED ON-LINE AT WWW.MOUNTPROSPECT.ORG BY SELECTING "VILLAGE CODE" FROM THE LEFT SIDE OF THE SCREEN.

I DO HEREBY CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION HAS BEEN FURNISHED BY ME AND TO THE BEST OF MY KNOWLEDGE IS CORRECT. I UNDERSTAND THAT ANY UNTRUE, INCONSISTENT OR MISLEADING INFORMATION SHALL BE CAUSE FOR THE REFUSAL TO GRANT OR THE REVOCATION OF ANY CERTIFICATE GRANTED PURSUANT TO THIS APPLICATION. I FURTHER CERTIFY THAT BY APPLYING IN WRITING FOR A CERTIFICATE TO OPERATE IN THE VILLAGE OF MOUNT PROSPECT I HAVE READ AND UNDERSTAND MY OBLIGATIONS UNDER APPROPRIATE VILLAGE ORDINANCES RESPECTIVE TO THE CERTIFICATE(S) FOR WHICH I AM APPLYING. I FURTHER CERTIFY THAT IF ANY OF THE FOREGORING INFORMATION, INCLUDING THE STATUS OF THE STATE LICENSE, CHANGES DURING THE COURSE OF THE CERTIFICATE YEAR I WILL NOTIFY THE VILLAGE, IN WRITING, WITHIN SEVEN (7) DAYS OF SUCH CHANGE.

Signature

Printed Name

Title

Date