



City of Sheffield Lake



609 Harris Road Phone: (440) 949-5767 Fax: (440) 949-7179

REQUIREMENTS FOR REGISTRATION

1. Application completed and returned
2. Certificate of Insurance with the City of Sheffield Lake named as the Additionally Insured
3. A check or cash made out to the City of Sheffield Lake (See FEES listed below)
4. Licensed Contractors must supply a copy of their Certification from the State of Ohio

Include a Self-addressed, Stamped Envelope if applying by mail

Applications missing required documents or information will be returned

APPLICATION FOR CONTRACTOR'S REGISTRATION

Applicant: (company name) _____

Address: (street, city, state, zip) _____

Phone: _____ Cell: _____ Fax: _____

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

Email Address: _____

Circle One:

General/Remodeler

Fence/Utility Bldgs.

Waterproofing/Sewer

Electrical (Cert. required)

Plumber (Cert. required)

HVAC (Cert. required)

Concrete/Masons/Paving

Landscaping/Tree Svc/Irrigation

Demolition/Excavation

FEES:

General Contractor

Sub-Contractor

Landscaping/Tree Trimmer

Seasonal (Mowing)

\$125.00

\$125.00

\$75.00

\$50.00

Signature of Applicant: _____ Date: _____



Office Use Only

Reg. No.: _____ Reg. Date: _____ Check # or Cash: _____ Amount Due: \$ _____