

**MAYFIELD VILLAGE
CONTRACTOR REGISTRATION APPLICATION**

Building Department
6622 Wilson Mills Rd, Mayfield Village, Ohio 44143
Phone 440-461-2213 Fax 440-442-5077 Office Hours 8:00 A.M. - 4:00 P.M.

DATE: _____ **FEE: \$25.00** **TYPE:** _____

I/WE DO HEREBY MAKE APPLICATION FOR A CERTIFICATE OF REGISTRATION TO ENGAGE IN THE BUSINESS OF: _____ WITHIN THE CORPORATION LIMITS OF THE VILLAGE OF MAYFIELD, IN ACCORDANCE WITH THE REQUIREMENTS OF THE CODIFIED ORDINANCES OF MAYFIELD VILLAGE.

I, _____, RESIDING AT _____
(Authorized Officer) (Home Address) (Zip)
REPRESENT _____
(Company) (Business Address) (Zip)
PHONE: _____
(Home) (Business) (Federal I.D. /Social Security)

FURNISH/LIST THE FOLLOWING:

Certificate of Insurance with Village Additionally Insured (10 day cancellation notice)

STATE CERTIFICATION: YES _____ (Submit copies of certification) NO _____

Names, title of company officers:

_____	_____	_____	_____
Name	Title	Name	Title

Training/schooling: _____

Actual experience/yrs. at trade: _____

Two business associates:

_____	_____
Name	Phone
_____	_____
_____	_____

I do hereby acknowledge that it is my responsibility (company's) to report all jobs to the Building Department and pay all fees according to the current fee schedule of Mayfield Village. Further, I agree to " earmark " all taxes reported to R.I.T.A. "EARNED IN MAYFIELD VILLAGE."

APPLICANT

Note: Snowplowing Contractors - List make of vehicles and license plate numbers:

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

NOTICE: ALL INSPECTIONS REQUIRE 24 HOUR NOTICE