	Company Name			
	Address			
	City, State, Zip			
	Email			
ion	Phone #		Fax #	
mat	Cell Phone #		Tax ID#	
for				
Company Information	☐ New	Renewal		
npa	☐ General	Remodeler	☐ Framer	☐ Concrete/Masonry
Con	☐ Electric	☐ HVAC	☐ Plumbing	☐ Fire Suppression
-	☐ Fire Alarm	☐ Water/Sewer	Other (miscellan	eous structural projects)
	State License Holder			
Required Enclosures	Submit the following information:			
nclo	Copy of Liability Insurance			
 Copy of current qualification certificate or sta Application Fee 				se (if applicable)
uire	11	\$		
Req				
	I understand that work shall not to be started without an approval permit.			
Signature	• I understand that the contractor registration expires each December 31 st and it is the responsibility of the contractor to renew the registration in a timely manner.			
	• This registration is revocable or may be suspended if the terms or conditions under which it is granted are violated. It is the responsibility of the contractor to ensure that the liability insurance and state license information is updated with New Albany to prevent any delays in processing permits or inspections.			
	Applicant Signature _			Date