



Community Development Contractor Registration Application

Company Information	<p>Company Name _____</p> <p>Address _____</p> <p>City, State, Zip _____</p> <p>Email _____</p> <p>Phone # _____ Fax # _____</p> <p>Cell Phone # _____ Tax ID# _____</p>
Required Enclosures	<p>Submit the following information:</p> <ul style="list-style-type: none"> • Complete Application • Copy of Liability Insurance • Copy of current qualification certificate or state license (if applicable) • Application Fee \$50.00 / each registration type • Please make checks payable to: The City of New Albany \$ _____
Signature	<p>• I understand that work shall not to be started without an approval permit.</p> <p>• I understand that the contractor registration expires each December 31st and it is the responsibility of the contractor to renew the registration in a timely manner.</p> <p>• 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.</p> <p>Applicant Signature _____ Date _____</p>