

Company Information

Company Name _____
 Address _____
 City, State, Zip _____
 Email _____
 Phone # _____ Fax # _____
 Cell Phone # _____ Tax ID# _____

- ☐ New
 ☐ Renewal
☐ General
 ☐ Remodeler
 ☐ Framer
 ☐ Concrete/Masonry
☐ Electric
 ☐ HVAC
 ☐ Plumbing
 ☐ Fire Suppression
☐ Fire Alarm
 ☐ Water/Sewer
 ☐ Other (miscellaneous structural projects)

State License Holder ☐ Yes ☐ No
 Name/Holder _____ License # _____

Required Enclosures

Submit the following information:

- Copy of Liability Insurance
- Copy of current qualification certificate or state license (if applicable)
- Application Fee

\$50.00 / each registration type \$ _____

Signature

- I understand that work shall not to be started without an approval permit.
- 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.
- 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** _____