

CONTRACTOR'S LICENSE APPLICATION

1.) LEGAL NAME OF BUSINESS: _____

2.) PHYSICAL LOCATAION OF BUSINESS: _____

3.) OFFICE MAILING ADDRESS: _____

4.) BUSINESS STATUS: (CIRCLE ONE):

INDIVIDUAL PARTNERSHIP CORPORATION OTHER _____

5.) BUSINESS PHONE NUMBER: _____

6.) BUSINESS OWNER'S FULL NAME: _____

7.) BUSINESS OWNER'S HOME ADDRESS: _____

8.) BUSINESS OWNER'S HOME PHONE NUMBER: _____

9.) LIST OF PARTNERS/OFFICERS & THEIR TITLES: _____

10.) DATE BUSINESS BEGAN: _____

11.) WEST VIRGINIA STATE CONTRACTOR'S LICENSE NUMBER (ATTACH CURRENT COPY TO THIS APPLICATION) _____

12.) TYPE OF CONTRACTING DONE: (CIRCLE ONE)

GENERAL MASONRY EXCAVATION PAVING PLUMBING

HVAC ROOFING ELECTRICAL OTHER: _____

13.) PERSON RESPONSIBLE FOR "BUSINESS AND OCCUPATION TAXES": _____

14.) HOW DO YOU WISH TO FILE YOUR CITY B&O TAX?

(CIRCLE ONE) BY THE JOB QUARTERLY

(THOSE WHO PAY BY THE JOB MUST PAY THEIR B&O TAXES WHEN PERMITS ARE ISSUED)

FISCAL YEAR ENDING JUNE 30, _____ (LIC #; for office use : _____)

LICENSE FEE.....\$90.00

JAUNARY - JUNE.....\$45.00

CONTRACTOR'S LICENSE APPLICATION; ART. 753 (08-27-02)