

CONTRACTOR'S LICENSING APPLICATION

NORTH WALES BOROUGH
300 SCHOOL SCREET
NORTH WALES, PA 19454

Date _____ License Fee: \$50.00

Applicant Name: _____
Address: _____

Phone Number: _____

Company Name: _____
Address: _____

Phone Number: _____

Type of Business: _____

Names of Insurance Company: _____
(Copy of Insurance Certificate Required)

Policy Number: _____

***Have any municipalities refused to issue or have revoked any similar contractor's license to the applicant within the last two (2) years?

YES _____ NO _____

***Has the applicant been convicted in the last two (2) years for any crimes or offenses under any federal or state criminal statute or for violation of any municipal ordinance which relate to offenses concerning the applicants work or contracts as a contractor?

YES _____ NO _____

I AGREE TO ABIDE BY THE TERMS AND CONDITIONS OF THE "NORTH WALES BOROUGH CONTRACTORS LICENSING ORDINANCE" AS ADOPTED AND THAT THE INFORMATION STATED ABOVE IS TRUE AND CORRECT.

Signature: _____

Title: _____