

VILLAGE OF ALSIP

4500 West 123rd STREET
ALSIP, ILLINOIS 60803

NEW APPLICANT ONLY

APPLICATION FOR CONTRACTOR'S LICENSE

PRINT ONLY:

Company Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Owner/Agent's Phone: _____

Type of Contractor: _____

Plumbing Contractor's State License No. _____ Date Expires: _____

Electrical Contractor's City License No. _____ Date Expires: _____

*Bond Required: _____ Yes _____ No

New License: _____ EMAIL: _____

I understand the issuance of a license is based on the information I have supplied on this application and also is conditioned on compliance with Village Ordinances and is subject to revocation if any information is found to be false or if I am found to be in violation of a village ordinance.

Name of Owner or Agent: _____ EIN# _____

Signature of Owner or Agent: _____

Note: The License if approved will expire on: _____ 20 _____

VILLAGE OF ALSIP USE ONLY

Approved BY: _____ Building Commissioner Date: _____

Approved BY: _____ License Chairman Date: _____

LICENSE FEE: _____

Date Received Payment: _____ 20 _____ Date Received Bond: _____ 20 _____

Signed: _____ Signed: _____

Village Clerk

Village Clerk