

CITY OF NILES, OHIO  
34 W. State Street  
Niles, Ohio 44446  
Phone: 330 544-9000, ext. 178  
Fax: 330 544-3429

Date: \_\_\_\_\_ Receipt: \_\_\_\_\_ License #: \_\_\_\_\_

NEW: ( )

### CONTRACTOR REGISTRATION

RENEWAL: ( )

**Do not leave any section blank or registration will not be approved**

Owner Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Federal Identification Number (FEIN): \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_

Business Address: \_\_\_\_\_

State/Zip: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

For what purpose are you registering: \_\_\_\_\_

Please enclose the following:

- 1.) Surety Bond in the amount of TEN THOUSAND DOLLARS (\$10,000.00)
- 2.) Ohio Worker's Compensation Certification, if other than sole proprietorship
- 3.) Proof of Liability Insurance coverage in the amount of THREE HUNDRED THOUSAND DOLLARS (\$300,000.00)
- 4.) Proof of State or Federal License per House Bill 402, (i.e. Plumber's licenses)

For more information about the requirements for registration with the City of Niles, Ohio.

See ORD #38-96 of the Codified City Ordinance

**Please complete each section. If item is not applicable, please give reason (i.e. no email address, no cell phone, etc.)**

Initial Fee: \$25.00      Annual Renewal Fee \$25.00      (Registration fees not refundable)

Amount enclosed: \$ \_\_\_\_\_ MAKE CHECKS PAYABLE TO: CITY OF NILES

I, \_\_\_\_\_, DO HEREBY DECLARE THAT ALL INFORMATION ON THE ABOVE REGISTRATION TO BE TRUE AND ACCURATE.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Respectfully submitted this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

Notary Public: \_\_\_\_\_ Commission expires: \_\_\_\_\_