

CITY OF NILES, OHIO  
34 W. State Street  
330-544-9000,ex.178; 330-544-3429 fax

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

Building & Zoning Department

NEW ( ) CONTRACTOR REGISTRATION RENEWAL ( )

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

City of Niles Tax Identification Number \_\_\_\_\_

Federal Tax Identification Number \_\_\_\_\_

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

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

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

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
- 4) Proof of State or Federal License per House Bill 402

For more information about the requirements for registration with the City of Niles, Ohio,  
See ORD #38-96 of the Codified City Ordinances.

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 \_\_\_\_\_,

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

(Please type or write legibly)

