



AN ETHNIC HERITAGE
BUILT FROM COAL

CITY OF SPRING VALLEY

215 North Greenwood Street
SPRING VALLEY, IL 61362

City Hall 815-664-4221 Fax 815-664-2114

email: svclerk@comcast.net
www.springvalleyil.us

CONTRACTOR REGISTRATION

NAME OF BUSINESS

TYPE OF BUSINESS

STREET ADDRESS OF BUSINESS

CITY

ZIP CODE

TELEPHONE NUMBER

EMERGENCY CONTACT INFORMATION:

PRINCIPAL OWNER'S NAME

HOME TELEPHONE NUMBER

PRINCIPAL OWNER'S ADDRESS (IF DIFFERENT FROM ABOVE) ZIP CODE

STATE LICENSE VERIFICATION (IF APPLICABLE):

STATE ROOFING LICENSE #

STATE PLUMBING LICENSE #

INSURANCE VERIFICATION

NAME OF GENERAL LIABILITY INSURANCE CARRIER

NAME OF AGENT PROVIDING
GENERAL LIABILITY INSURANCE

AGENT'S TELEPHONE NUMBER

AGENT'S ADDRESS

NAME OF WORKER'S COMPENSATION INSURANCE CARRIER

NAME OF AGENT PROVIDING
WORKER'S COMPENSATION INSURANCE

AGENT'S PHONE NUMBER

AGENT'S ADDRESS

ZIP CODE

By signing this document, the applicant agrees to perform all work in conformance with all applicable State of Illinois regulations and all City of Spring Valley Building Codes and Standards. Failure by contractor to remedy any work not in compliance with the State of Illinois regulations and City of Spring Valley Building Codes and Standards shall result in the termination of this registration, and the contractor shall not be allowed to perform further work within the City of Spring Valley, Illinois.

DATE

APPLICANT'S SIGNATURE

GENERAL INFORMATION:

- (1) Registration is valid for one year.
- (2) Registration fee of \$100.00 must be paid at the time of application.
- (3) No registration shall be valid until the required fee has been paid.
- (4) Certificates of Insurance must be provided when the application is filed with the City of Spring Valley.