



OFFICE USE ONLY

LICENSE #: _____

CONTRACTOR LICENSE APPLICATION

Community Development Department · 1050 W. Romeo Road · Romeoville, IL 60446 · Tel. (815) 886-7200 · Fax. (815) 886-2724

Business Name:		
Mailing Address (no P.O. Box):		
City, State, Zip Code	Phone #	Fax #
Contact Name:	Cell #	
Type of Contractor:	Email Address:	

PLEASE NOTE: ALL CONTRACTORS WORKING WITHIN THE VILLAGE LIMITS MUST HAVE A CURRENT VILLAGE LICENSE.

THE VILLAGE OF ROMEOVILLE WILL NOT ACCEPT FAX COPIES OF THE FOLLOWING DOCUMENTATION:

REQUIREMENTS (ORIGINALS ONLY)

Please mail all requirements together (INCOMPLETE APPLICATION WILL BE SENT BACK):

- **APPLICATION FEE:** \$150.00/12 month license
- **LICENSE AND PERMIT BOND:** \$10,000.00
- **CERTIFICATE OF INSURANCE:**
 - Workman's Compensation Ins:
 - \$100,000.00 each accident
 - \$500,000.00 policy limit
 - \$100,000.00 each employee
 - General Liability:
 - \$1,000,000.00 per occurrence
 - \$2,000,000.00 per occurrence
- **COPY OF LICENSE:**
 - State Roofer's License
 - Electrical License

Please sign here if you are the only employee

Village of Romeoville to be named as additional insured. Certificate must bear endorsement that insurance may not be cancelled by the insurer with at least ten (10) days prior written notice to the Village. Cancellation of such insurance will cause automatic revocation of the permit.

Applicant's Signature

Date of Application

Office use Only
Date of Issued: _____
Expiration Date: _____
Date Received: _____