

Charter Township of Orion - Building Department

2323 Joslyn Rd. Lake Orion, MI 48360 Phone: (248) 391-0304, ext. 6000 www.oriontownship.org

REGISTRATION for Contractors

* **REQUIREMENTS WHEN SUBMITTING:** Submit <u>1 form for each license</u> you wish to get registered. <u>Illegible or Incomplete Forms will **NOT** be processed.</u> Submit completed registration information through the mail, drop box, in-person, or email (to Permit Technician) <u>WITH</u> permit application – Registration can **NOT** be applied for through BSAonline.

Payment IS REQUIRED at time of registration (NO BSAonline payments for registration except when submitted with a permit application.)

I. COMPANY INFORMATION				Office Use Only
* NAME OF COMPANY:				Clarke
* ADDRESS:	CITY:	STATE:	ZIP CODE:	Clerk: Registration Fee: \$
* PHONE #:				Form of Payment:
* EMAIL (LINKED TO BSAONLINE):				□ Check □ Cash □ Card □ With permit application
* BSA USERNAME (LINKED TO EMAIL ABOVE):				
* FEDERAL ID #:				
* WORKER'S COMP #:				
IF EXEMPTED, REASON WHY:				
II. STATE LICENSE INFORMATION				
* TYPE OF STATE LICENSE:	Fire Alarm	Fire Sup	pression	
□ Mechanical □ Plumbing	□ Sign Contractor	□ Sign Spe		
□ Other:				
COMPANY LICENSE # (if applicable): LICENSE EXPIRATION DATE:				
* CONTRACTOR LICENSEE NAME:				
* CONTRACTOR LICENSE #: * LICENSE EXPIRATION DATE:				
MASTER LICENSEE NAME:				
MASTER LICENSE #: LICENSE EXPIRATION DATE:				
IMPORTANT: See below for REQUIRED documents to be submitted with this registration form.				
 Copy of ALL current licenses - BUILDERS – COMPANY (if applica CONTRACTORS MASTERS (if applicable) 	ble) & INDIVIDUAL			
 Clear copy of driver's licenses for – Contractor license holder. Master license holder Any individuals that are authorized to a set of the s	to sign for permits.			
3. Copy of Workman's Compensation/Liab	oility insurance (if appl	icable).		
 Letter of Authorization for qualified age MUST be on company letterhead and s 			permit applicat	ions is NOT the license holder. Letters
 Registration Fee & Registration Expirat Building (5-31 Annually): Demo (5-31 Annually): Sign (12-31 Annually): Electrical (12-31 Annually): Low Voltage (12-31 Annually): 	\$25.00 F \$25.00 F \$25.00 M \$25.00 F	Fire Alarm (12 Fire Suppres Mechanical (I Plumbing (Da Sprinkler (4-3	sion (8-31 Ar Date on Lice ate on Licens	nually): \$25.00 nse): \$15.00

* Physical Signature of License Holder: _____