

OTSEGO COUNTY BUILDING & SAFETY DEPARTMENT

1066 CROSS STREET GAYLORD, MICHIGAN 49735

989-731-7400 FAX=989-731-7419

CONTRACTOR REGISTRATION

BUSINESS NAME _____

MAILING ADDRESS _____

BUSINESS PHONE/FAX _____

BUSINESS CELL # _____

LICENSE HOLDER'S NAME _____

LICENSEE'S ADDRESS _____

LICENSEE'S PHONE/FAX _____

CELL PHONE _____

FEDERAL ID# _____

MESC# _____

WORKMENS COMPENSATION# _____

EXPIRATION DATE _____

WORKMAN'S COMPENSATION CARRIER _____

PHONE NUMBER _____

LIABILITY INSURANCE CARRIER _____

CONTRACTOR'S LICENSE _____

ENCLOSE COPY OF CURRENT CONTRACTOR'S LICENSE & DRIVER'S LICENSE FOR SIGNATURE VERIFICATION

**I HAVE RECEIVED A COPY OF "BUILDING DEPARTMENT PROCEEDURES"
DATED _____**

SIGNATURE OF LICENSEE _____ DATE _____