



OFFICE USE ONLY

LICENSE #: _____

SUB-CONTRACTOR LICENSE APPLICATION

Community Development Department · 17 Montrose Drive · Romeoville, IL 60446 · Tel. (815) 886-7203 · Fax. (815) 372-4039

Business Name:		
Mailing Address:		
City	State	Zip Code
Phone #	Fax #	Cell #
Type of Contractor:		
Contact Name	Email Address:	
General Contractor's Name		Phone Number

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

REQUIREMENTS:

- **APPLICATION FEE:** \$75.00/12 month license
- **LICENSE AND PERMIT BOND:** \$10,000.00
- **CERTIFICATE OF INSURANCE:**

<u>Workman's Compensation Ins:</u>	<u>Liability-Bodily Injury:</u>	<u>Liability-Property Damage:</u>
\$500,000.00 each accident	\$100,000.00 per single instance	\$25,000.00 minimum
\$100,000.00 policy limit	\$300,000.00 per occurrence	
\$500,000.00 each employee		
- **COPY OF LICENSE: State Roofer's License, State Plumbing License, or Electrical License from the municipality where tested**

Village of Romeoville to be names 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

Registration # S- _____	Date of Issued: _____
Application Received by: _____	Expiration Date: _____