

Contractor Registration Form

Please provide a copy of the State License and a photo ID of the License holder

Builder \$ 25.00

Electrical \$ 15.00

Mechanical \$ 15.00

Sign Specialist \$ 15.00

Plumbing \$ 15.00

Mobile Home Installer \$ 10.00

CONTRACTOR INFORMATION

Name: _____

Telephone Number: _____

Address: _____

Fax Number: _____

City: _____

State: _____

Zip: _____

Federal Employer ID #: _____

MESC Employer #: _____

Liability Carrier: _____

Workers Comp. Carrier: _____ Expiration date: _____

State License Number: _____ Expiration date: _____

Qualifying Officer or Master if Applicable

Name: _____

State License Number: _____ Expiration date: _____

COMMERCE