



City of Detroit
Buildings, Safety Engineering and Environmental Department
4th Floor Coleman A. Young Municipal Center
Detroit, Michigan 48226
313-224-3170

APPLICATION FOR RENEWAL OR REGISTRATION OF CONTRACTOR LICENSE

TYPE OF LICENSE OR REGISTRATION (check one)

| | | | | |
|---------------------------------------|---|--|--|---|
| <input type="checkbox"/> WRECKING | <input type="checkbox"/> AWNING ERECTOR | <input type="checkbox"/> WELDER | <input type="checkbox"/> WINDOW WASHER | |
| <input type="checkbox"/> STEEPLE JACK | <input type="checkbox"/> SIGN ERECTOR | <input type="checkbox"/> RESIDENTIAL BUILDER, MAINTENANCE / ALTERATION | | |
| <input type="checkbox"/> ELECTRICAL | <input type="checkbox"/> MECHANICAL | <input type="checkbox"/> ELEVATOR | <input type="checkbox"/> BOILER | <input type="checkbox"/> BOILER INSPECTOR <input type="checkbox"/> PLUMBING |

BUSINESS

| | | | |
|----------------------------------|--------------------------------------|-------|----------|
| Business Name | Telephone Number (include area code) | | |
| Address (Street Number and Name) | City | State | Zip Code |

APPLICANT

| | | | |
|--|-------------------------|---------------|---|
| Applicant's Address (Street Number and Name) | City | State | Zip Code |
| E-Mail Address | Driver's License Number | Date of Birth | Last 4 Digits of Social Security Number xxx - xx - |
| Applicant's Name (Print) | Applicant's Signature | | Telephone Number (include area code) |

SUPERVISING EMPLOYEE

(Supervising employee is the licensed person holding business license. Not applicable for wrecking, sign and awning erectors and window washer licenses.)

| | | | |
|---|----------------------------------|---------------|---|
| Supervising Employee Address (Street Number and Name) | City: | State | Zip Code |
| E-Mail Address | Driver's License Number | Date of Birth | Last 4 Digits of Social Security Number xxx - xx - |
| Supervising Employee Name (Print) | Supervising Employee (Signature) | | Telephone Number (include area code) |

IF PARTNERSHIP OR CORPORATION, LIST OFFICERS OR PARTNERS BELOW

| | | | | | |
|------|-------|--------------|------|-------|----------|
| Name | Title | Home Address | City | State | Zip Code |
| Name | Title | Home Address | City | State | Zip Code |

APPLICANT'S AFFIDAVIT

I certify the information provided is true and accurate to the best of my knowledge, and the supervising employee has a valid contractor license and continuously working for the above company. I further understand falsification of any statement is cause for cancellation of this registration if issued.

Applicant's Signature: _____ **Title:** _____

NOTARY PUBLIC

Subscribed and sworn to before me this _____ day of _____, 20__

Signature of Notary _____ Printed Name of Notary _____

Notary Public, State of Michigan, County of _____ My Commission Expires _____

Back Side Official Use Only

CITY OF DETROIT BUILDINGS, SAFETY ENGINEERING AND ENVIRONMENTAL DEPARTMENT
OFFICIAL USE ONLY

BUILDINGS

| | | | |
|--|---|------------------|--------------------|
| <input type="checkbox"/> Contractor Registration | <input type="checkbox"/> Contractor Renewal | Class of License | |
| Contractor License Number | | Expires | Surety Bond Number |
| Approval (Buildings Signature) | | | Date |

ELEVATORS

| | | | |
|--|--|--|--|
| <input type="checkbox"/> Journey Person Registration | <input type="checkbox"/> Contractor Registration | <input type="checkbox"/> Limited Journey Person Registration | <input type="checkbox"/> Limited Contractor Registration |
| <input type="checkbox"/> Journey Person Renewal | | <input type="checkbox"/> Contractor Class License Renewal | <input type="checkbox"/> Limited Contractor Renewal |
| Journey Person License Number | | Expires | Limited Journey Person License Number |
| | | | Expires |
| Contractor License Number | | Expires | |
| Approval (Elevator Signature) | | | Date |

BOILERS

| | | | |
|--|---|---------------------------------|---------|
| <u>Registration</u> <input type="checkbox"/> Installer <input type="checkbox"/> Repairer <input type="checkbox"/> Inspector | <u>Renewal</u> <input type="checkbox"/> Installer <input type="checkbox"/> Repairer <input type="checkbox"/> Inspector | State Contractor License Number | Expires |
| | | National Board. Number or Stamp | Expires |
| Approval (Boiler Signature) | | | Date |

MECHANICAL

| | | | |
|--|--|---------|-----------------|
| <input type="checkbox"/> Contractor Registration | <input type="checkbox"/> Contractor License Number | Expires | Classification: |
| Approval (Mechanical Signature) | | | Date |

ELECTRICAL

| | | | |
|--|---|---------------------------|---------|
| <input type="checkbox"/> Contractor Registration | <input type="checkbox"/> Contractor Renewal | Contractor License Number | Expires |
| Approval (Electrical Signature) | | | Date |

PLUMBING

| | | | |
|--|---|---|-------------------------------|
| <input type="checkbox"/> Contractor Registration | <input type="checkbox"/> Water Treatment Operator Registration Number | <input type="checkbox"/> Assistant Water Treatment Operator Registration Number | |
| Contractor License Number | | Expires | Master Plumber License Number |
| | | | Expires |
| Approval (Plumbing Signature) | | | Date |