

Village of New Lenox
Community Development
1 Veterans Parkway
New Lenox, IL 60451
815.462.6490
815.462.6469(fax)
www.newlenox.net

the Village of New Lenox

"Home of Proud Americans"



Application for Contractor Registration

CONTRACTOR REGISTRATION #: _____

SUBMIT THE FOLLOWING:

1. A **completed** Application for Contractor Registration form
2. Payment of the \$150.00 registration fee
3. An **original, signed** Surety Bond in the minimum amount of \$10,000 (**Faxed/Emailed copies not accepted**)
4. A copy of the Certificate of Liability Insurance, General Liability, with a \$1,000,000 limit for each occurrence AND \$1,000,000 General Aggregate, listing the Village of New Lenox as Certificate Holder
5. Proof of Workers Compensation Insurance with a minimum \$500,000 limit per occurrence, listing the Village of New Lenox as Certificate Holder

BUSINESS INFORMATION:

NAME: _____
PRESENT CONTRACTOR REGISTRATION # (if renewal): _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP CODE: _____
PHONE #: _____ FAX #: _____
BUSINESS TYPE: _____
BUSINESS REGISTRATION # (if located within the Village): _____

OWNER INFORMATION:

NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP CODE: _____
PHONE #: _____ FAX #: _____
EMAIL ADDRESS: _____

STATE LICENSE NUMBERS: (IF APPLICABLE - PROVIDE COPY OF STATE LICENSE)

PLUMBER'S LICENSE #: _____ EXP. DATE: _____
SPRINKLER'S LICENSE #: _____ EXP. DATE: _____
ROOFER'S LICENSE #: _____ EXP. DATE: _____

LIABILITY INSURANCE INFORMATION:

INSURANCE COMPANY NAME: _____
POLICY #: _____ EXP. DATE: _____

SURETY BOND INFORMATION: (MUST SUBMIT ORIGINAL, SIGNED SURETY BOND)

BOND COMPANY: _____
BOND #: _____ EXP. DATE: _____

SIGNATURE OF APPLICANT: _____ DATE: _____

PLUMBING AND SPRINKLER CONTRACTORS NEED ONLY SUBMIT THE COMPLETED APPLICATION FOR CONTRACTOR REGISTRATION AND A COPY OF THE BUSINESS STATE REGISTRATION.