

APPLICATION FOR CONTRACTOR'S LICENSE	TOWNSHIP OF RIDLEY 100 E. MACDADE BLVD., FOLSOM, PA 19033 PHONE # 610-534-4803 FAX # 610-534-2545	DATE: _____
		LICENSE #: _____

Pursuant to Ridley Code Chapter 173, Article I, I hereby apply for a Contractor's License in the Township of Ridley and I submit the following statement.

BUSINESS INFORMATION	
FIRM NAME: _____	
CONTRACTOR CLASSIFICATION: _____	
PHONE #: _____	FAX #: _____
STREET ADDRESS: _____	
CITY, STATE, ZIP: _____	
TYPE OF BUSINESS: <input type="checkbox"/> INDIVIDUAL PROPRIETORSHIP <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> CORPORATION	
EMPLOYER IDENTIFICATION NUMBERS: STATE _____ FEDERAL _____	

LIABILITY INSURANCE INFORMATION	
CERTIFICATE(S) OF INSURANCE MUST HAVE THE TOWNSHIP OF RIDLEY AS CERTIFICATE HOLDER.	
LIABILITY INSURANCE CARRIER: _____	
POLICY # _____	POLICY EXPIRES: _____
COVERAGE AMOUNTS: PROPERTY DAMAGE: _____	PERSONAL INJURY: _____

WORKERS COMPENSATION COVERAGE INFORMATION	
CERTIFICATE(S) OF INSURANCE MUST HAVE THE TOWNSHIP OF RIDLEY AS CERTIFICATE HOLDER	
<input type="checkbox"/> APPLICANT IS A QUALIFIED SELF-INSURER FOR WORKERS COMPENSATION	
<input type="checkbox"/> NAME OF WORKERS COMPENSATION INSURER: _____	
POLICY # _____	POLICY EXPIRES: _____
<input type="checkbox"/> RELIGIOUS EXEMPTION UNDER THE WORKERS COMPENSATION LAW.	
<input type="checkbox"/> CONTRACTOR WITH NO EMPLOYEES. CONTRACTOR PROHIBITED BY LAW FROM EMPLOYING ANY INDIVIDUAL TO PERFORM WORK UNLESS CONTRACTOR PROVIDES PROOF OF INSURANCE TO THE TOWNSHIP OF RIDLEY.	

APPLICANT INFORMATION	
LIST HERE THE NAMES OF OWNERS, PARTNERS, DIRECTORS AND OFFICERS OF THE BUSINESS	
TITLE: _____	NAME: _____
ADDRESS: _____	
TITLE: _____	NAME: _____
ADDRESS: _____	
TITLE: _____	NAME: _____
ADDRESS: _____	
TITLE: _____	NAME: _____
ADDRESS: _____	

FILL OUT BOTH SIDES COMPLETELY

APPLICATION FOR CONTRACTOR'S LICENSE
Page 2

TOWNSHIP OF RIDLEY
100 E. MACDADE BLVD., FOLSOM, PA 19033
PHONE # 610-534-4803 | FAX # 610-534-2545

Have complaints against you ever been filed with the Better Business Bureau or the Consumer Protection Agency? NO YES

Do you agree to confirmation of the above with the Better Business Bureau or other agencies? YES NO

Every contractor licensee shall, within 10 days after a change in control of ownership or of management or of change of address or trade name, notify the Code Enforcement Officer of such changes.

Licenses of all contractors shall expire on December 31 of each year following the date of issue unless prior thereto the license is revoked or suspended. Upon payment of the annual license fee, as prescribed by § 173-6, prior to the expiration date, a license shall be renewed for another year, and the authority to do business shall continue in effect until such time within the year as the Commissioners revoked or suspended the license.

I hereby certify that the statements contained herein are true and correct to the best of my knowledge and belief. I understand that if I knowingly make false statement herein I am subject to penalties as may be prescribed by law or ordinance.

I hereby authorize the Township of Ridley to obtain any information that its officials require concerning statements in this application, which shall remain the property of the Township of Ridley.

Signature of Owner or Authorized Agent Date: _____

Print Name Signed Above E-mail: _____

Phone #: _____ Fax #: _____ Mobile #: _____

Address: _____

City: _____ State: _____ Zip: _____

State of Pennsylvania:
: ss
County of Delaware:

On this _____ day of _____, a.d., 20____, before me, the subscriber, a Notary Public of the Commonwealth of Pennsylvania, residing in _____, personally appeared

_____, who being duly sworn according to law, depose and say, that they are the owner or authorized agent of the owner of the property indicated upon this application; that the facts set forth in this contractor's license application are true; that this affidavit is made for the purpose of procuring a contractor's license; that the all work will be completed in accordance with the "approved" construction documents and PA Act 45 (Uniform Construction Code) and any additional approved code and ordinance requirements adopted by the Township of Ridley.

WITNESS my hand and seal the day and date above written.

Signature of Owner or Authorized Agent of the Owner

Notary Public

My Commission Expires