



Approved Contractor Application

Applicant Information

Name of Applicant/Company _____

Address _____
Street City State Zip

Office# _____ Email: _____

Name of Responsible Person in Charge _____

Phone# _____ Email _____
(Emergency 24 Hour)

Insurance & Bond Information

Company Name _____

Address _____
Street City State Zip

Phone# _____ Email: _____

Policy # _____ Bond # _____

Contractors shall have and maintain on file in the City Clerk's office, the following:

- General liability insurance in an amount of One Million Dollars (\$1,000,000.00)
- A Surety Bond in the amount of Fifteen thousand Dollars (\$15,000.00)

The Undersigned does hereby certify the accuracy of the submitted information.

Signature _____ Title _____ Date _____