



Laketon Township
2735 W. Giles Road, N Muskegon, MI 49445
PH. 231-744-2454 Fax: 231-744-2506

The following items are required to be submitted with this form:

- **Copy of current license .**
- **Proof of liability insurance**
- **\$15.00 registration fee .**

Contractor Registration

License #: _____ Expiration Date: _____

Contractor Type: circle one below

Building Electrical Plumbing Mechanical
Sign Installer Alarm Installer Excavator or Water/Sewer Installer

PLEASE PRINT CLEARLY

Contractor Information

Contractor Name: _____ Contact Person: _____

Address: _____ City/ State/ Zip: _____

Phone: _____ Fax: _____ Mobile/Cell: _____ Other: _____

E-mail Address: _____

Mail to information (if different than above)

Name: _____

Address: _____ City/State/Zip: _____

Licensee Information (if different than above)

Licensee Name: _____ Address: _____

City/State/Zip: _____ Phone: _____ Mobile: _____

Fax: _____ E-mail Address: _____

Federal ID# _____ State Employer ID # _____
(Federal Employer ID# or reason for exemption) (State Employer ID# or reason for exemption)

Workers Compensation Insurance# _____ Policy # _____
(Worker Comp. Ins. / reason for exemption)

Liability Insurance Carrier _____ Policy# _____
(Liability Insurance information is required)

Date Policy Issued: _____ Date Policy Expires: _____

Contractor Signature: _____ Date: _____

**Contractor/Licensee must be registered with Laketon Township to apply for Building, Electrical,
Mechanical or Plumbing Permits**