



REGISTRATION # _____

\$25.00 Annual Fee

Building Division
164 E Lincoln Hwy
DeKalb, IL 60115
(815) 748-2070

Brenda.hart@cityofdekalb.com

Office Use

CY 20

Date Mailed

Contractor Registration Application

Type of Contractor

STREET CONSTRUCTION & MAINTENANCE CONTRACTOR

Name of Firm: _____

Business Owner: _____

Contact Name (if different than owner): _____

Business Address: _____

Business Phone: _____ Cell: _____

E-mail: _____ Fax: _____

Insurance Agent: _____ Phone: _____

No license will be effective and no work permitted until the required \$10,000 Surety Bond and certificate of insurance has been submitted and is on file with the City of DeKalb. Annual renewal is due by January 31st each year with above mentioned paperwork, **\$25.00 registration** fee and the completed registration form to be submitted to the Building Division.

Insurance Requirements:

Per City of DeKalb Municipal Code, Chapter 6.11: Liability Insurance in force, the limits of which are not less than \$250,000 for injury to one (1) person and \$500,000 for injuries arising out of an accident in which more than one (1) person is involved. 2. Property damage insurance in force, with a minimum coverage of \$250,000 and a deductible clause not exceeding \$500.00. Each certificate of insurance must indicate the policy's expiration date.

Owner's name - please print

Owner or Authorized Person's Signature

Date

Office Use Only

Date Received: _____
Registration Form: _____ Fee: _____ Surety Bond: _____ Certificate of Ins. _____