



# City of Mentor

## Application for Certificate of Registration

Company Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

### Check the trade(s) for which registration application is made:

- |   |   |
|---|---|
| <input type="checkbox"/> ELECTRICAL               | <input type="checkbox"/> GENERAL                              |
| <input type="checkbox"/> HEATING/AIR CONDITIONING | <input type="checkbox"/> RIGHT-OF-WAY (SITE UTILITIES/PAVING) |
| <input type="checkbox"/> PLUMBING                 | <input type="checkbox"/> LAWN SPRINKLER                       |
| <input type="checkbox"/> FIRE PROTECTION          | <input type="checkbox"/> TREE MAINTENANCE / TREE REMOVAL      |

### Attach the following:

- **ORIGINAL** Mentor Bond form for \$10,000 for **EACH** trade registration (except Tree Contractors).
- Evidence of liability insurance for bodily injury and property damage for each, in the minimum amount of \$1,000,000 (\$500,000/\$250,000). Provide a certificate of insurance.
- **\$100.00** for each registration. (Note: **Renewals** of registrations from the prior calendar year, submitted before January 31<sup>st</sup>, shall be **\$50.00** each.)
- The Municipal Income Tax Contractor Registration Form shall be completed per Mentor Code of Ordinances, Section 1307.03(e).
- All Specialty Contractors which include, electrical, plumbing, hydronics, fire suppression and heating & air conditioning trades shall present a current State of Ohio License. Contact the State of Ohio Construction Industry Licensing Board at (614) 644-3493 for further information on testing for the State License.

All required information must be mailed together for proper processing, otherwise, your entire submission will be returned.

### ALL REGISTRATIONS EXPIRE ON DECEMBER 31 OF EACH YEAR.

I hereby swear that all of the information is true to the best of my knowledge, that I am at least 18 years of age, able to interpret construction plans and specifications, and able to comply with the requirements of the City of Mentor Code of Ordinances.

\_\_\_\_\_  
Print Applicant's Name

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

(REVISION 11/2020 ALL OTHER VERSIONS ARE OBSOLETE)

Mentor Municipal Center, 8500 Civic Center Boulevard, Mentor, Ohio 44060-2499 [www.cityofmentor.com](http://www.cityofmentor.com)  
Engineering and Building Department Phone 440-974-5785 \ Fax 440-974-5708 \ Email [building@cityofmentor.com](mailto:building@cityofmentor.com)  
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