



# City of Ontario

555 Stumbo Road Ontario, Ohio 44906

[www.ontarioohio.org](http://www.ontarioohio.org)

Tel: 419.529.3818

Fax: 419.529.6132

## Contractor's License Application

The City of Ontario, Ohio has enacted Ordinance 06-13, on 05-04-06, requiring all contractors working within the City limits to obtain an annual license. License runs from January 1 through December 31. You must apply for a renewal license each calendar year.

All forms and applications must be typed or legibly printed.

No license will be issued unless all required information is submitted.

## Each Zoning Permit

At the time a zoning permit is issued for each project a list of subcontractors that are intended to be used on that project will be required.

After submittal of the completed forms signed by an authorized representative and the payment of the \$100.00 license fee (Ordinance 15-05), your license will be mailed to you within five (5) days.

Please complete all information requested including a list of your intended **Subcontractors**. **(Subcontractors are also required to obtain a license.)** You, as the general contractor, are required to see that all subcontractors are licensed.

Renewal annual license fee for the following year will be \$50.00 (Ordinance 15-05).

Application is available on City website: [www.ontarioohio.org](http://www.ontarioohio.org)

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## Contractor's License Requirements for Submission

1. Provide Certificate of Insurance (COI)
2. Provide Contractors license form for either New or Renewal. (The renewal may only be used if the company or individuals **Contractors License** was obtained the previous calendar year.)
3. Provide payment in the form of a check or money order, as the City does not take credit cards at this time.
4. Please send the above required information and payment to:  
Ontario Municipal Building  
Attention: Sallie Neal  
555 Stumbo Road  
Ontario, Ohio 44906-1259

Thank you,

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Sallie Neal, Income Tax Administrator  
[sneal@ontarioohio.org](mailto:sneal@ontarioohio.org)  
419-529-3045

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## CONTRACTOR'S LICENSE APPLICATION FORM

\$100.00 License Fee

to be paid by check or money order, NO CASH

Individual     Partnership     Corporation

\_\_\_\_\_  
Name of Contracting Firm                      Address                                      City                                      State      Zip

\_\_\_\_\_  
Phone Number                                      Fax Number

\_\_\_\_\_  
Name of Principle If Individual              Social Security #

List Names of all partners, if Partnership    Social Security # of all Partners

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Name of President (if Corporation)              Federal I.D. #

\_\_\_\_\_  
Chief Financial Officer or Treasurer (if Corporation)

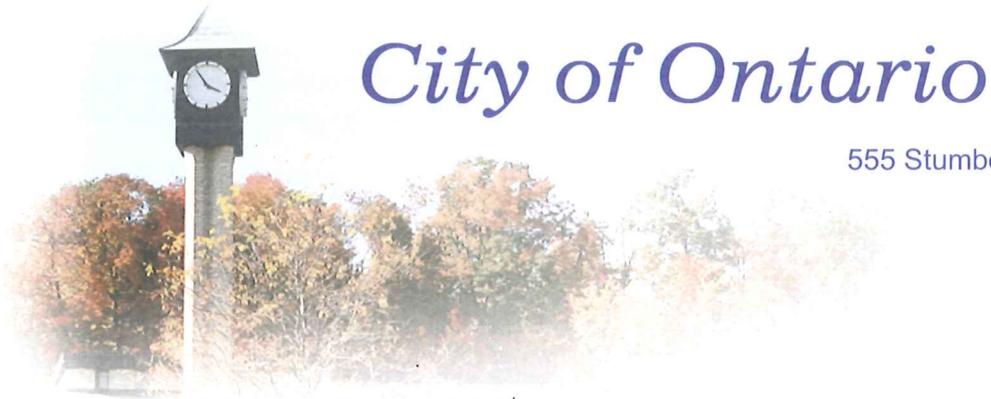
Description of type of business:  
\_\_\_\_\_  
\_\_\_\_\_

Number of years in this business: \_\_\_\_\_

I acknowledge that I am authorized to sign this application and that I/we will withhold and submit to the City of Ontario, Ohio those City taxes as outlined by the attachment describing Ordinance 97-60. I also acknowledge that all subcontractors will obtain a license. I am responsible to assure their compliance.

\_\_\_\_\_  
Authorized Signature                                      Title                                      Date

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## General Contractors Certificate of Subcontractors

All subcontractors must have a license

\_\_\_\_\_  
General Contractor                      License number                      Date

\_\_\_\_\_  
Project Name                              Project Location

### Sub Contractors

Name \_\_\_\_\_ FID/SSN \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Type of Work \_\_\_\_\_

Name \_\_\_\_\_ FID/SSN \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Type of Work \_\_\_\_\_

Name \_\_\_\_\_ FID/SSN \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Type of Work \_\_\_\_\_

Name \_\_\_\_\_ FID/SSN \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Type of Work \_\_\_\_\_



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## CONTRACTOR'S LICENSE APPLICATION FORM

### RENEWAL

\$50.00 License Fee

to be paid by check or money order, NO CASH

Individual     Partnership     Corporation

\_\_\_\_\_  
Name of Contracting Firm                      Address    City    State                      Zip

\_\_\_\_\_  
Phone Number                                      Fax Number

\_\_\_\_\_  
Name of Principle If Individual              Social Security #

\_\_\_\_\_  
List Names of all partners, if Partnership    Social Security # of all Partners  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Name of President (if Corporation)              Federal I.D. #

\_\_\_\_\_  
Chief Financial Officer or Treasurer (if Corporation)

\_\_\_\_\_  
Description of type of business:

\_\_\_\_\_  
Number of years in this business:

I acknowledge that I am authorized to sign this application and that I/we will withhold and submit to the City of Ontario, Ohio those City taxes as outlined by the attachment describing Ordinance 97-60. I also acknowledge that all subcontractors will obtain a license. I am responsible to assure their compliance.

\_\_\_\_\_  
Authorized Signature                                      Title    Date

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## Income Tax

As a contractor working in the City of Ontario you are required to abide by Ordinance 97-60 which was passed on November 20, 1997 and reads as follows:

(191.03 IMPOSITION. (B)) Effective Date. The tax shall be levied, collected, and paid with respect to the salaries, wages, commissions, and other compensation, and with respect to the net profits of business, professions, or other activities earned on or after January 1, 1998.

**We remind you all gross wages earned by your employees are taxable at the rate of one and one half (1-1/2) percent while working within the City. You must withhold this tax and remit to the City of Ontario Income Tax Division.**

A copy of the reporting forms is attached. Additional copies can be obtained by contacting the Treasurer.

You are required to mail or fax a list of all subcontractors you employ giving name of company, address, and phone number along with the type of sub-work they will be performing. Additionally, you must inform each subcontractor of this requirement.

Mail this information on or before starting actual construction to:

Sallie L Neal  
City of Ontario  
Income Tax Department  
555 Stumbo Road  
Ontario, OH 44906-1259

Phone: 419-529-3045  
Fax: 419-529-6132

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