City of Ontario

555 Stumbo Road Ontario, Ohio 44906
www.ontarioohio.org
Tel: 419.529.3818
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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 _____

Strong past, bright future