

# TAYMOUTH TOWNSHIP

4343 E. Birch Run Rd.

Birch Run, MI 48415

Phone 989-624-4159 • Fax 989-624-5466

## CONTRACTOR REGISTRATION FORM

Date: \_\_\_\_\_

Fee: \$15.00

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

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Trade:  Building  Electrical  Plumbing  Mechanical  Other: \_\_\_\_\_

1. Occupational License Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

2. Worker's Disability Compensation Insurance Carrier: \_\_\_\_\_

(a.) Work Comp #: \_\_\_\_\_ (provide a copy of Workman's Comp Certificate)

(b.) OR - Reason for Exemption:  No Employee's or (provide a 'Disability Exemption Form' can be acquired by calling (517) 284-8922 Compliance & Employer Records Division)

3. Internal Revenue Code, Employer Identification Number: \_\_\_\_\_

Reason for Exemption: \_\_\_\_\_

4. Michigan Employment Security Commission Number: \_\_\_\_\_

Reason for Exemption: \_\_\_\_\_

Section 23a of the State Construction Code Act of 1972, Act No. 230 of the public acts of 1972, being section 125.1523a of the Michigan Compiled Laws prohibits a person from conspiring to circumvent the licensing requirements of this state relating to persons who are to perform work on a residential building or a residential structure. Violators of section 23a are subject to civil fines.

Applicant's Signature: \_\_\_\_\_

TO BE PROVIDED: 1.) COPY OF STATE LICENSE 2.) PICTURE ID (I.E. DRIVERS LICENSE, COMPANY ID.)

3.) WORKMANS COMP. CERTIFICATE (OR) PROVIDE A DISABILITY EXEMPTION FORM (PER 2B ABOVE)

Check# \_\_\_\_\_ Cash \_\_\_\_\_ CC \_\_\_\_\_ Date \_\_\_\_\_ Initials \_\_\_\_\_