

BOROUGH OF YEADON

Church Lane & Baily Road, P.O. Box # 5187
Yeadon, Pennsylvania 19050 Office 610-284-3110 Fax 610-284-2138

CONTRACTOR'S REGISTRATION
BUSINESS INFORMATION

Date: _____

Firm Name _____ Address _____
City _____ State _____ Zip _____ Phone _____
_____ Individual _____ Partnership _____ Corporation
Type of Trade _____ Number of Years in Business _____

3rd Party Inspection Agency Name (For Electrical Contractors Only) _____

EMPLOYER IDENTIFICATION NUMBERS

City _____ State _____ Federal _____ Phila. Mercantile Lic # _____

INSURANCE INFORMATION

No Contractor's license will be issued unless the applicant files a Certificate of Insurance and Worker's Comp coverage with the Borough at the time of the registration

Public Liability Insurance Carrier _____
Policy # _____ Amount _____ Policy period from _____ to _____
Workman's' Compensation Insurance Carrier _____
Policy # _____ Amount _____ Policy Period from _____ to _____
Insurance Agent's Name _____ Address _____
Phone _____ City _____ State _____ Zip _____

Has the applicant has a similar contractors license refused or revoked by any municipality within 2 years of the application () Yes () No

APPLICANT INFORMATION

Company Owners Name _____ Home Address _____
Home Phone _____ City _____ Zip _____ Title _____

Employees
Name _____ Home Address _____
Home Phone _____ City _____ Zip _____ Title _____

Employees
Name _____ Home Address _____
Home Phone _____ City _____ Zip _____ Title _____

Employees
Name _____ Home Address _____
Home Phone _____ City _____ Zip _____ Title _____

OFFICE USE ONLY

Type of Trade License _____ License # _____
Date: _____ Insurance Expires: _____