

Building Division

Engineering, Planning and Building Department
540 Laird Avenue S.E.
Warren, Ohio 44484
Office: (330)841-2916 Fax: (330)841-2614

CONTRACTOR REGISTRATION (Shall be typed or neatly printed)

Applications **are not** processed on a walk-in basis, and can be mailed in. Please allow up to 30 days for processing.

New Contractor Registration Form

Contractor's Name _____
(owner or officer) (First) (MI) (Last)

Home Address _____

Home Phone _____, mobile _____ and Email _____

Important Notice

All contractors who will be or are currently working in our jurisdiction need to have a City of Warren Tax Identification Number. Telephone the City Income Tax Office (330-841-2623) if you do not have or do not know your Identification Number, and they will issue a number.

City of Warren Tax Identification No. _____

Federal Tax I.D. No. _____ AND Social Security No. _____

Registering as: Business Name, _____

Business Phone _____ Fax _____

Business Address _____

(Be specific including suite number if applicable) (city) (state) (zip)

also, please read carefully:

As stated in the City's Codified Ordinance section 1305.06(a) provides for the suspension or revocation of a Contractor's Registration:

(a) Any Contractor's Registration may be denied, suspended or revoked by the building Official if the holder of the Registration willfully, or by reason of reckless disregard, violates any statute of the State, or an Ordinance, rule or regulation of the City, or the Building Code, relating to the erection, construction, repair, improvement, replacement, removal, alteration or remodeling of any building within the City, done for hire for another. Further, any registration maybe denied, suspended or revoked upon conviction of the holder of any criminal charge relating to trustworthiness or breach of fiduciary duty.

Have you ever been convicted of a criminal charge relating to trustworthiness or breach of duty?

_____ or _____
YES NO

also,

You must submit the following documents for Contractor Registration file:

- 1) Surety Bond in the amount of \$10,000.00 (one year period); We will only accept original Bond;
- 2) Ohio Worker's Compensation Certification; if other than sole proprietorship;
- 3) Proof of Liability Insurance Coverage, minimum amount of \$300,000.00;
- 4) Proof of State or Federal License per House Bill 402 for Mechanical & Electrical Contractors, only.
- 5) Contractor's Qualification Statement (notarized on Page 7).

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED. It is important that all of the documents to be submitted for your file do not have conflicting names, only one (1) specific name. A fee of \$50.00 shall be charged in addition to the fees for Contractor Registration for all improperly submitted or incomplete documents.. Also, it shall be the Contractor's responsibility to renew and maintain the Contractor Registration annually, the expiration date being the date the Bond ends. For more information about the requirements to register with the City of Warren, Ohio, see *Section 1305 of the Codified City Ordinances*, at www.warren.org.

Initial fee:

\$200.00

General Contractor, Sub Contractor, Home Improvement,
Fire Protection, Mechanical (HVAC & Plumbing), & Electrical

- Registration fees are non-refundable, money order or checks only (Also the initial fee will be paid if more than six (6) months lapses from the expiration date and the entire application for new Contractor Registration form will need to be submitted.)

Amount enclosed \$ _____ Make checks payable to the **City of Warren, and**
can be mailed to 540 Laird Avenue S.E., Warren, Ohio 44484.

CONTRACTORS' BOND
(Section 1305.02 of the Codified Ordinances of the City of Warren)

KNOW ALL MEN BY THESE PRESENT, That I (we), the undersigned _____, as Principal, and _____, as Surety(ies), are hereby held and firmly bound unto the City of Warren, Ohio, a municipal corporation, as obligee, in the penal sum of Ten Thousand Dollars and 00/100 (\$10,000.00), in lawful money, for which payment, well and truly to be made, we hereby bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally.

THE CONDITIONS OF THE ABOVE OBLIGATION ARE SUCH that, WHEREAS, the above named Principal has made application to the City of Warren, Ohio, for registration pursuant to Chapter 1305 of the Codified Ordinances of said City, for a term of one year beginning _____ and ending _____
(Beginning Date)

(Ending Date)

NOW, THEREFORE, if the said Principal, for and during the aforescribed term, shall faithfully do and perform all work and services within the purview of Chapter 1305 of the Codified Ordinances of the City of Warren entered into or contracted for by Principal, well and faithfully indemnify and save harmless the City of Warren from and against any and all losses and damages that may be occasioned by reason of any negligence on the part of the Principal or Principal's agents or employees (including subcontractors) while engaged in such work and services, faithfully observe and strictly comply with all ordinances, rules and regulations of the City of Warren relative to any such work or services, then this obligation shall be null and void; otherwise to remain in full force and effect and the same may be sued upon at the instance of any person, firm or corporation with whom the said Principal may hereafter contract to perform such work or services for any losses and damages sustained by said person, firm or corporation on account of the failure of said Principal or Principal's agents or employees (including subcontractors) to perform the work or services contracted for in accordance with the applicable ordinances, rules and regulations of the City of Warren.

IN TESTIMONY WHEREOF, we have hereunto set our hands this _____ day of _____, 20____.

NOTE: POWER OF ATTORNEY MUST BE ATTACHED TO ALL BONDS AND RENEWALS.

SEAL MUST APPEAR ON BOND FORM. OUT OF STATE POWER OF ATTORNEY MUST BE COUNTER-SIGNED BY AN OHIO AGENT.

(Type Address of Ohio Agent)

APPROVED AS TO LEGAL FORM AND CORRECTNESS:

Law Director

Principal

BY: _____
Signature & Title

Print Name

*Surety Company

By: _____
Ohio Resident Agent/Non-Resident
(Sign & Type Ohio Address) Attach
License if Non-Resident Ohio Agent

***This Bond form shall be used**

Contractor's Qualification Statement

The undersigned certifies that the information provided herein is true and sufficiently complete so as not to be misleading.

Mark (X) in space provided for type of work you are registering for:

All types shall submit proof of required state license certificates and identification numbers when applicable (*) along with application.

- General Contractor or Sub-Contractor
- *Mechanical Contractor
- *Plumbing Contractor
- *Electrical Contractor
- *Fire Alarm and Detection Systems (initial fee \$200.00)
- *Automatic Sprinkler Systems (initial fee \$200.00)
- *Alternative Automatic Fire-Extinguishing Systems(initial fee \$200.00)
- *Elevators and Conveying Systems (initial fee \$200.00)
- Interior Finish Contractor, commercial projects. (initial fee \$200.00)
OBC Chapter 8 Interior Finishes - wall and ceiling, floor, decorations and trim.)
- Street Right of Way Contractor

1. Organization

1.1 How many years has your organization been in business as a contractor? _____

1.2 How many years has your organization been in business under its present business name ? _____

1.3 If your organization is a corporation, answer the following:

Corporations must include any official document which lists the required information,

Such as pertinent sections of the Articles of Incorporation, current annual report, etc. (Enclose a copy of Articles of Incorporation)

1.3.1 Date of Incorporation: _____

1.3.2 State of Incorporation _____

1.3.3 President's name: _____

1.3.4 Vice-president's name(s): _____

1.3.5 Secretary's name: _____

1.3.6 Treasurer's name: _____

1.4 If your organization is a partnership, answer the following:

Partnerships must include any official document which lists the required information,

Such as partnership agreement, current annual report, etc.

1.4.1 Date of organization: _____

1.4.2 Type of partnership (if applicable): _____

1.4.3 Name(s) of general partner(s) _____

2. Experience

List at least five satisfactory references from the most recently completed projects of similar size and scope for which you are registering for.

For type of work performed: specify residential or commercial, type and Square Footage of project.

1. _____
Year Project Name City State

Project Address (city) (state) Type of work performed

Contact Person Phone Number

2. _____
Year Project Name City State

Project Address (city) (state) Type of work performed

Contact Person Phone Number

3. _____
Year Project Name City State

Project Address (city) (state) Type of work performed

Contact Person Phone Number

4. _____
Year Project Name City State

Project Address (city) (state) Type of work performed

Contact Person Phone Number

5. _____
Year Project Name City State

Project Address (city) (state) Type of work performed

Contact Person Phone Number

3. Does your organization currently have any registered complaints against it with the Better Business Bureau. _____ YES _____ NO

If yes explain: _____

4. Trade References

List at least three (3) companies you currently do business with.

1. _____
Company Name City State

Contact Person Phone Number

2. _____
Company Name City State

Contact Person Phone Number

3. _____
Company Name City State

Contact Person Phone Number

5. Bank References

List at least one (1) bank you currently do business with.

1. _____
Bank Name City State

Contact Person Phone Number

City of Warren)
) SS
County of Trumbull)

I, _____, hereby certify
(First) (MI) (Last)

that I have read and examined this qualification statement and contactor registration application and know the same to be true and correct. All provisions of laws and ordinances governing this registration will be complied with whether specified herein or not. The granting of a contractors registration does not presume to give authority to violate or cancel the provisions of any other state or federal law regulating contractors.

I hereby certify that I am authorized by this organization to make this application as its authorized agent, and we agree to conform to all applicable laws of this jurisdiction.

Sworn to and subscribed before me this _____ day of _____ 20____
(month) (year)

Applicant (Signature)

My Commission Expires: _____
Notary Public

***** Office Use Only *****

_____ **APPROVED** _____ **REJECTED**

Christopher A. Taneyhill, Building Official

Reason: _____

Anyone desiring to appeal a decision of the Building Official pertaining to the building code (chapter 13) may do so by filing a written appeal to the City's Residential Board of Appeals. Forms are available from the Building Official at 540 Laird Avenue S.E. Warren, Ohio 44484.