

**VILLAGE OF NORTH HORNEILL**  
**APPLICATION FOR CONTRACTOR'S LICENSE (\$10 YEARLY FEE)**

DATE: \_\_\_\_\_ 2023      2026

**TO THE VILLAGE CLERK:**

**I Hereby apply for a Contracting License pursuant to Section 71-1 thru 7' of the Code of the Village of North Hornell:**

First Name: \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Business Name & Type \_\_\_\_\_

Address: \_\_\_\_\_

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

NY State Driver's License # \_\_\_\_\_ DOB \_\_\_\_\_

**Copy of drivers license must be attached to this form.**

**\*\*\*\* YOU MUST LIST AT LEAST 1 REFERENCE \*\*\*\***

**(Include Name, Address & Phone Number Local References please.**

Reference: \_\_\_\_\_ Reference: \_\_\_\_\_

Telephone #'s \_\_\_\_\_

Do you have employee's: ( ) Yes ( ) No      I work alone: ( ) Yes ( ) No

\*\*\*\*\*  
\*\*\*\*\*  
\*\*\*\*\*

**PROOF OF LIABILITY INSURANCE MUST BE PROVIDED FOR YOURSELF**  
**PROOF OF WORKMEN'S COMP. FOR EMPLOYEE'S**  
**WORKMEN'S COMPENSATION EXEMPTION CE-200 # \_\_\_\_\_**

Have you ever been convicted of a misdemeanor: ( ) Yes ( ) No

Have you ever been convicted of a felony: ( ) Yes ( ) No

If Yes: what, when and where: \_\_\_\_\_

\_\_\_\_\_  
**Applicant's Signature (GIVES CONSENT TO VERIFY INFORMATION)**

**I recommend: Approval ( ) Disapproval ( )**

**I recommend: Approval ( ) Disapproval ( )**

\_\_\_\_\_  
**OIC/Chief of Police Signature**

\_\_\_\_\_  
**Code Enforcement Officer Signature**

\_\_\_\_\_  
**Village Clerk/Mayor Signature**

E)

1-5 5

—

ON)

al ( )