



Building Permits & Inspections CONTRACTOR REGISTRATION

PLEASE PRINT OR TYPE—INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED
ALL CONTRACTOR REGISTRATIONS EXPIRE ONE YEAR FROM REGISTRATION

Business Name (DBA) _____

Business Phone (_____) _____ Email Address _____

Mailing Address _____ City _____ State _____ Zip _____

Contact Person _____ Daytime Phone (_____) _____

Name of Licensee: _____ Phone Number (_____) _____

Mailing Address _____ City _____ State _____ Zip _____

Check the appropriate contractor classification:

Master Electrician (1)

Journeyman Electrician (2)

Mechanical (3)

Fire Alarm (4)

Fire Sprinkler System (5)

Fire Extinguisher (5)

Fixed System (5)

Master Plumber (6)

Roofing

Other: _____

- (1) Provide copy of state license, driver's license
- (2) Provide copy of state license, driver's license
- (3) Provide copy of state license, driver's license, insurance and \$100
- (4) Provide copy of state license and insurance \$100
- (5) Provide copy of state license, insurance \$100
- (6) Provide copy of state license, driver's license & insurance

I hereby apply for contractor registration with the City of Keene and certify that the foregoing information is correct to the best of my knowledge.

Date: _____

Name (printed): _____ License #: _____

Signature: _____

IT IS A VIOLATION OF CITY ORDINANCE TO CONDUCT BUSINESS IN KEENE WITHOUT BEING REGISTERED. FAILURE TO REGISTER YOUR COMPANY COULD RESULT IN A COMPLAINT BEING FILED WITH THE STATE AND/OR MUNICIPAL COURT

Permit #: _____ (if applicable)

Special Notes _____

Please email applications to molly.martin@keenetx.com