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CALN TOWNSHIP

DEPARTMENT OF CODE ENFORCEMENT
Raymond Stackhouse, Code Official/Deputy Fire Marshal
Joseph Arvay, Property Maintenance/Housing Inspector

610-384-0600 fax: 610-384-0689

253 Municipal Drive, P.O. Box 72149 Thorndale, PA 19372-0149

2016

CONTRACTOR REGISTRATION & PLUMBER LICENSING

THE 2015 APPLICATION FEE IS \$80.00 FOR CONTRACTORS AND ELECTRICIANS.

THE 2015 APPLICATION FEE FOR MASTER PLUMBERS IS \$80.00 AND \$25.00 FOR JOURNEYMAN.

If registering for both contractor and plumbing licenses only one fee of \$80.00 is required.

Please complete the application in full. You must answer every question on the form and SIGN & DATE ITEMS #8 & #9. Return the application with your payment. Have your insurance agent issue a Certificate of Insurance naming Caln Township as the Certificate Holder, showing your General Liability and Workers Compensation coverage, if applicable. Your Contractor's Registration cannot be issued without the Certificate of Insurance accompanying the application.

PLEASE COMPLETE THE FOLLOWING INFORMATION (FRONT AND BACK)

Registration Year 2016

Date of Application: _____

Caln Township Contractor
Registration I.D. # _____

Number of Vehicles _____

**CONTRACTOR REGISTRATION - \$80.00
MASTER PLUMBERS REGISTRATION - \$80.00
JOURNEYMAN PLUMBING FEE - \$25.00**

1. Business Name _____ Telephone #: _____

Address _____

City _____ State _____ Zip _____

2. Names of Owner, Partners, Directors and Officers

Name _____

3. Type of Business: _____

4. Number of Employees _____

5. Has any other municipality denied your company of any similar Contractor's registration or license in the last two (2) years?

Yes _____ No _____ (Section 3.B.2.)

If yes, give explanation why:

6. List all convictions within two (2) years prior to the date of the application (Section 3.B.4), if not, please insert "none".

7. List all unsatisfied civil judgments in any jurisdiction that involved lawsuits in which it was alleged that the applicant failed to complete or improperly perform a contract (Section 3.B.5.), if not, please insert "none".

8. I hereby agree that the information in this application shall be available to the public for inspection and if I am granted a Contractor Registration, I agree to accept and be governed by all ordinances, rules and regulations which are or may be adopted by the Board of Commissioners of Caln Township.

Signature: _____ Date _____
Owner

9. I hereby swear and affirm that the above statements are true and that all work will be done as described and will comply with all provisions of the Township of Caln contractor's Registration Ordinance 1994-2 (copy of which may be obtained upon request at the Township Office).

Signature: _____ Date _____
Owner

10. THE FOLLOWING INFORMATION MUST BE SUBMITTED WITH THE APPLICATION.

Certificate of Insurance as required under Section 9 of the Ordinance including Workers Compensation Coverage.