



1102 Willis Avenue, Suite 300  
PO Box 545  
Perry, IA 50220  
Ph: 515-465-2481  
Fax: 515-465-4862

perryia.org



**Contractor Registration**

Date:

Company Name:

Address:

City:

State:

Zip Code:

Phone Number:

**Principals of Firm**

Name:

Title:

Address:

City:

State:

Zip Code:

Phone Number:

Name:

Title:

Address:

City:

State:

Zip Code:

Phone Number:



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Corporation: Partnership: Sole Proprietorship:

Current Number of Employees: Office Staff: Trade:

Type of work performed without subcontracting services:

Concrete: Framing: Masonry: Electrical:

Mechanical: Other:

The undersigned certifies the above information to be correct and complete to the best of their knowledge.

Signature: Title:

Date:

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**155.15 Contractor Registration and Insurance Requirements.** Contractors are required to register with the City on forms provided by the Building Official. There is a one-time fee for registration set by resolution of the City Council. Contractors are defined as individuals or entities whose primary source of income is derived through the trades of building construction, remodel and/or demolition contractors. All contractors shall have and maintain commercial general liability insurance in an amount required by their insurance carrier. Contractors shall annually provide to the City a certificate of applicable insurance.

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**City Use Only**

City Building Official: \_\_\_\_\_ Date: \_\_\_\_\_

Receipt Number: \_\_\_\_\_