INFORMATION FOR GENERAL CONTRACTOR APPLICATION:

Section 4114 of the Columbus Code requires the following be presented in order to secure a contractor registration.

	General Contractor Application; completed and signed by the person chosen to be the responsible party for the company registration. This application must be notarized.			
	A Bond in the amount of \$25,000. The enclosed bond form must be used. Specific information for bond completion may be found on the enclosed bond information sheet.			
S S	A Certificate of Liability Insurance listing City of Columbus, Department of Building & Zoning Services, 111 N Front Street, Columbus, Ohio 43215, as a certificate holder, written by an insurance company licensed to do business in the State of Ohio, with the limits of liability no less than three hundred thousand dollars (\$300,000) for damages to a single person, and five hundred thousand dollars (\$500,000) for one (1) occurrence.			
N	NOTE:			
iı	individual name, and company name if applicable, must be listed identically on all documents. Please review all information and have your application notarized before filing for a license. If the application is not notarized, all documents will be returned without being processed.			
REGISTRATION FEE				
N	Non-refundable \$300.00 registration fee. If paying by check, make check payable to Columbus City Treasurer.			
A	Application may be submitted to:			
В	BZSLicensing@Columbus.gov (you will receive an email containing a link to pay the fee online)			
	-OR-			
1	City of Columbus - Department of Building & Zoning Services 111 N Front Street Columbus, Ohio 43215			

For additional information, contact the Customer Service Center at bzslicensing@columbus.gov or (614) 645-7433 or visit us online at www.columbus.gov/bzs.



pplication No.:	
	Official Use Only

General Contractor Application 111 N Front Street, Columbus, Ohio 43215 Phone: 614-645-7433 • Email: bzslicensing@columbus.gov • www.bzs.columbus.gov

ALL FEES ARE NON-REFUNDABLE • Make checks payable to the Columbus City Treasurer

			Date		
NOTE: For application requirements for	ANY license or r	registration, refer to			
PART I: QUALIFICATION CERTIFIC I, the undersigned, hereby apply for a Cor information and answers to ALL of the qu	ntractor Registra	tion, in the City of	Columbus, Ohio, and for that purpose give the following		
Full Name			Date of Birth		
Home Address	City/Sta	ate/Zip	Home Phone Number		
Email Address for notification of permits	issued under app	plicant's registratio	n:		
Email Address for communication related	I to issuance of a	pplicant's registrat	ion:		
Have you previously held this type of regi	stration with the	e City of Columbus?	Yes No		
If YES, provide the following if known:	Registration Nu	mber:	Expiration Date:		
Have you ever been summoned before an	y City of Columb	ous Contractor Boar	rd of Review for any type of violation hearing? Yes No		
If YES, which board?	Dat	te	Board Decision		
	confirms his/her	association with th	ERN ne business concern as a legal full-time officer, proprietor, work only for the business concern listed below.		
Business Name			Phone Number/Ext		
Address	City/Sta	ate/Zip			
PART III: STATEMENT BY APPLICANT I hereby certify that, to the best of my knowledge and belief, all statements made herein or attached are complete and accurate. I understand that any false statements later disclosed may cause loss of my right of registration, and may subject me to prosecution under Ohio Revised Code Section 2921.13.					
Signature of Applicant (sign in presence of notary or Building & Zonir	g Services Official)	Print/Type Nar)	ne Date		
Sworn to before me and signed in my pres	sence this	day of	, in the year		
Notary Seal Here					
Signature of N	Notary Public or	Building & Zoning	Services Official My Commission Expires		