



## **PLANS AND PERMITS**

1030 E. Tallmadge Ave. Akron, OH 44310 330-375-2010

## **City of Akron Contractor Registration**

Business Name:	Akron Tax Registration Number
	Summit County Contractor Registration Number
Principal Business Address:	Phone Number:E-Mail:
Registration Expiration Date: June 30, 2018	}
Business Type: Sole Proprietorship / Partnershi	p / Corporation / LLC/ Other (Please Specify)
Please list all business partners or other partiownership interest in the business:	ies (individual or corporate) that hold at least a 15%
Please list two names of approved individuals to	o pull permits on the business's behalf:
Ohio Construction Industry Licensing Board No Expiration Date:	umber:
Signature:	
Print Name and Title:	
Please attach:	

- Certificate of liability insurance.
- Copy of current Ohio Bureau of Workers Compensation policy.
- Registration fee of \$100.00.