



City of Wood Dale
Community Development Department
404 N Wood Dale Rd
Wood Dale, IL 60191
Phone: 630-766-5133
Fax: 630-787-3758

Contractor Registration Application

Application Fee \$100.00

Date of Application: _____

Company Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ Cell _____ e-mail _____

Type of Business: _____

Partnership or Corporation: _____

Partners Names/Addresses _____

Insurance Company _____

Include copies of all Federal, State & Local required licenses and registration certificates where applicable.

All contractors must have a Certificate of Insurance with the City of Wood Dale as Certificate Holder.

Electrical Contractors must maintain a \$10,000.00 License and Permit Bond with the City of Wood Dale.

The undersigned states the above information is correct and complete.

Date

Signature of Applicant

Office Use

Date Paid _____

Approved by _____