



CITY OF WOOD DALE

Community Development Department
404 N Wood Dale Rd | Wood Dale, IL 60191
P: 630-766-5133 | F: 630-787-3758
permits@wooddale.com

Contractor Registration Application

Business Name: _____

Business Owner Name: _____

Business Mailing Address: _____

Business Phone: _____ Cell: _____ E-mail: _____

Type of Contractor (one trade per application/registration):

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> Asphalt | <input type="checkbox"/> Carpenter | <input type="checkbox"/> Concrete/Paver | <input type="checkbox"/> Demolition ¹ |
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Elevator | <input type="checkbox"/> Excavation ¹ | <input type="checkbox"/> Fence |
| <input type="checkbox"/> Fire Alarm ² | <input type="checkbox"/> Fire Sprinkler ² | <input type="checkbox"/> General | <input type="checkbox"/> HVAC (including refrigeration) |
| <input type="checkbox"/> Irrigation ^{1,2} | <input type="checkbox"/> Low Voltage | <input type="checkbox"/> Masonry | <input type="checkbox"/> Plumbing ^{1,2,3} |
| <input type="checkbox"/> Roofing ² | <input type="checkbox"/> Security Alarm ² | <input type="checkbox"/> Sewer ¹ | <input type="checkbox"/> Sign |
| <input type="checkbox"/> Other: _____ | | | |

¹ \$10,000 bond is required for water, sewer and demolition work

² Current state license is required

³ Current IDPH Registration is required

A Certificate of Insurance with \$2,000,000 in public liability coverage listing the City of Wood Dale as Certificate Holder is required and must be provided at time of application.

The undersigned states the above information is correct and complete.

Applicant Name (Print)	Applicant Signature	Date
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Office Use Only

Contractor #: _____	License Submitted:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Amount Paid: _____	Bond Submitted:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Date Paid: _____	Insurance Submitted:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Approved by: _____	IDPH Registration Submitted:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A