



License Application Contractor/Tradesman

**City of Evansville-Vanderburgh County
Building Commission**
1 N.W. ML King Jr. Boulevard
Room 310, Civic Center Complex
Evansville, IN 47708
Telephone: (812) 436-7880
www.evansville.in.gov

PLEASE PRINT CLEARLY

Exam Information

Master Tradesman

Electrician HVAC Installer Steam fitter Refrigeration Installer

Journeyman Tradesman

Electrician HVAC Installer Sheet Metal Installer Steam Fitter Refrigeration Installer

General Contractor

Residential Building Commercial Building

Sub Contractor

Excavating Contractor Underground Utility Contractor Piling and Caisson Contractor
 Concrete Footing and Flatwork Contractor Unlimited Concrete Contractor Brick and Masonry Contractor
 Waterproofing Contractor Structural Steel Contractor Wood Framing Contractor
 Building Insulating Contractor Drywall Partition Contractor Tile and Marble Contractor
 Glass and Glazing Contractor Siding and Guttering Contractor Residential Remodeling Contractor
 Limited Roofing Contractor Unlimited Roofing Contractor Building Wrecker Contractor

Specialty Contractor

Fire Sprinkler Contractor Fire Alarm Contractor Building Mover Elevator and Escalator Contractor
 Flammable Liquid Tank and Piping Contractor Manufactured Home Installer Manufactured Home Repairman
 Class A Sign Erector Class B Sign Erector Journeyman Sign Erector Apprentice Sign Erector
 Temporary Sign Erector Limited License Professional Contractor Special Subcontractor
 Unlimited Swimming Pool Contractor Limited Swimming Pool Contractor

Applicant and Business Information

Name *(first, middle, last)*

Residence address *(number and street)*

City

State

Zip Code

Business Name

Business address *(number and street)*

City

State

Zip Code

Cell phone number

()

Home telephone number

()

Business telephone number

()

Extension:

E-mail address

I would like to receive electronic news (updates) and event notification from the Building Commission. Yes No

A request for Criminal Record History Form must be completed and attached to this application.

The Licensing and Disciplinary Board may not approve the application if it finds the applicant has been convicted of a crime within the past three years involving dishonesty, fraud, deceit, or lack of integrity whereby the applicant has been benefited or whereby some injury has been sustained by another.

Criminal Background Information

If you answer "Yes" to any of the following three (3) questions you must explain fully in a signed affidavit, explaining the facts and or events, including all related details. Describe the event including location, date, and disposition. If it involved criminal charges, please include court documentation.

1. Has Disciplinary action ever been taken regarding any license, registration, certificate, or permit that you hold or have held?

Yes No

2. Have you ever been denied a license, registration, certificate, or permit to practice or perform any regulated occupancy in any state (including Indiana) or country? Yes No

3. Except for minor violations laws resulting in fines and arrests or convictions that have been expunged by a court,

(1) have you been arrested;

(2) have you entered into a prosecutorial diversion or deferment agreement regarding a felony in any state;

(3) have you ever been convicted of a felony in any state;

(4) have you ever plead guilty to a felony in any state;

(5) have you ever plead nolo contendere to a felony in any state? Yes No

Qualification Information

Have you graduated from high school or obtained a GED? Yes No

List any degrees, training, and/or apprentice programs you have completed *(attach additional information, if needed)*

Are you currently enrolled in an Approved Training Program? Yes No If "Yes", please provide information below.

List name of the **Approved Training Program** you are enrolled in or have completed. *(attach additional information, if needed)*

Staff verified enrollment in Approved Training Program Yes No

Staff Signature

Date

Are you currently employed? Yes No Self-employed If "Yes", please provide the information below.

Name of present employer

Length of employment *(years)*

Address of present employer

Phone Number

Attach three notarized letters of recommendation including proof of four years of experience or current registration as a professional engineer in the respective trade.

Business Registration Information

Describe your position in the business. Owner Officer Full-time Employee

Name Business

Federal Tax ID Number

Describe your business and services *(attach additional information, if needed)*

Describe your business organization

Sole Proprietor Partnership Corporation

Company Registration Insurance Requirements

General Liability: Attach proof of general liability insurance in an amount not less than One Million Dollars (\$1,000,000.00) with good and sufficient surety insuring all users of the licenses and indemnifying and holding harmless those persons sustaining loss or damages resulting from any and all work done under Building Contractor license.

Bond: Attach proof of a surety bond in the amount of Twenty-five Thousand Dollars (\$25,000.00) established in the applicant's name on a form provided to the Insurance Company by the Building Commission.

Worker's Compensation: Attach proof of worker's compensation coverage or an affidavit stating that by Indiana Law such applicant is not required to have worker's compensation insurance.

Affirmation

I hereby swear or affirm that the statements made in this application are true, complete and correct.

Signature of applicant

Date signed (month, day, year)

