

CONTRACTOR LICENSE APPLICATION

Village of South Chicago Heights
3317 Chicago Road P.O. Box 770, South Chicago Heights, IL 60412
Phone: (708)755-1880 Fax: (708)755-1881

**ALL REQUIREMENTS LISTED BELOW NO. 1 thru 4 MUST BE ON A CERTIFICATE OF INSURANCE.
SURETY BOND MUST ALSO BE SUBMITTED.
APPLICATIONS WILL NOT BE PROCESSED UNTIL ALL DOCUMENTATION IS RECEIVED.**

INSURANCE REQUIREMENTS:

1. Comprehensive automobile liability in the sum of \$500,000 bodily injury per person, \$1,000,000 bodily injury per accident, \$500,000 property damage each occurrence and \$1,000,000 bodily injury and property damage combined each occurrence.
2. Workers compensation in the statutory limits with the employer's liability in the sum of \$500,000 bodily injury per person.
3. Comprehensive general liability in the sum of \$1,000,000 bodily injury each occurrence, \$1,000,000 bodily injury aggregate, \$500,000 property damage per occurrence and \$1,000,000 property damage aggregate.
4. Notice of cancellation of the policy will be given to the Village Clerk at least 30 days before such cancellation is effective.
5. \$10,000 Surety bond.

\$150.00 LICENSE APPLICATION FEE

*****APPLICANT/BUSINESS AGREES TO OBSERVE ALL VILLAGE ORDINANCES*****

Please print the following information:

Owner's Name: _____ Phone _____

Applicant's Name _____ Applicant's Title _____

Signature of Applicant _____ Date _____

Name of Business _____

Address of Business _____

City _____ State _____ Zip Code _____

Phone: _____ Fax: _____

Nature/Type of Business: _____

Has applicant ever been refused a license elsewhere or had a previous license revoked?

Yes ___ No ___ If so, please explain _____