

City Of Southport
6901 Derbyshire Road, Southport, Indiana 46227
Office Number (317)786-3585
Email: clerktreasurer@southport.in.gov
www.southport.in.gov

Craft Contractor's License Application Electrical HVAC Wrecking (Please Choose One)

New Renewal (Existing City of Southport General Contractor License # _____)
 Sole Proprietor Partnership Corporation LLC

Exact Legal Name of Corporation, LLC, Partnership, or Sole Proprietor's Business Name. _____

List all Officers if Business is a Corporation, LLC, or Partnership

Name of Sole Proprietor _____

Physical Address (Required if Mailing Address is a P.O. Box) _____ P.O. Box _____

City _____ State _____ Zip Code _____

Business Number () _____ - _____ Cell Phone Number () _____ - _____

Email Address _____

List all Employees, Partners, and /or Officers who will be authorized to secure permits. (Use additional sheet, if necessary)

_____ Signature	_____ Printed Name
_____ Signature	_____ Printed Name

This application must be signed and dated. Signature indicates that all information is complete and accurate.

Contractors are responsible for maintaining current license information, in addition to submitting proof of current general liability coverage, workman's compensation coverage if applicable, and surety bond coverage before performing any work in the City of Southport.

Signature of Officer, Partner, or Sole Proprietor Date ____/____/____

SOLE PROPRIETORS or PARTENERSHIPS with NO EMPLOYEES, Please Read and Sign Below:

Please be advised that _____ has/have no employees at this time.

If in the future employees are hired, a certificate of insurance reflecting a policy of Workman's Compensation will be provided.

Signature _____ Date ____/____/____

Contractor's License Requirements

- 1. Provide Certificate of Insurance listing "City of Southport" as Certificate holder.
- 2. Provide \$10,000 Surety bond listing "City of Southport and/or Unknown Third Party" as obligee.
- 3. Provide current license issued by the City of Indianapolis or another approved entity.
- 4. A two year Residential license fee is \$150. A two year Commercial license fee is \$200.

For Office Use Only

License # _____ Date ____/____/____ Processed By _____