



## Registration Form

Registration is necessary every calendar year.

Company Name: \_\_\_\_\_

Licensee Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

State License # \_\_\_\_\_ Type of License: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Workman's Comp #: \_\_\_\_\_

(MESC) *Need copy of policy*

Federal ID #: \_\_\_\_\_

Insurance Company: \_\_\_\_\_

Policy #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

*(Need copy of policy, name WLT as additional insured & certificate holder)*

Licensed

Contractor Signature: \_\_\_\_\_

Phone #: \_\_\_\_\_ Date: \_\_\_\_\_

**For proper registration in White Lake Township,  
this form must have an original signature of the licensed contractor.**

Fees:

Building \$20.00

Electrical \$20.00

Mechanical \$15.00

Plumbing \$1.00