

City of Norwich
Contractor Application

GENERAL INFORMATION:

Business Name

Corporation/LLC Partnership Sole Proprietorship

Name of Owner(s)

Business Address

Mailing Address (if different)

Employer Identification Number (EIN)

Office Phone #

Cell Phone #

Email address

Number of years in business: _____

Are you a certified Minority and Women Owned Business Enterprise (MWBE)? Yes No

Are you a certified lead contractor? Yes No

Contractors must attach evidence of insurance to the application. Required insurances include:

General Liability Bodily Injury Property Damage

Worker's Compensation (if exempt please include the Certificate of Attestation of Exemption (CE-200))

AREAS OF EXPERTISE: Please check all that apply.

Roofing

Plumbing

Window replacement

Heating/ventilation

Door replacement

Electrical

Structural support repair

Attic/sidewall insulation

Foundation wall repair

Asbestos/hazardous materials

Siding

Other: _____

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REFERENCES: Provide three references for jobs completed over the last two years.

Name of Owner

Telephone #

Address

Type of work completed for customer

Name of Owner

Telephone #

Address

Type of work completed for customer

Name of Owner

Telephone #

Address

Type of work completed for customer

Please sign, date, and return to:

City of Norwich
Department of Community Development
1 City Plaza
Norwich, NY 13815

Applicant signature

Date

Please contact Erik Scrivener, Community Development Director with any questions by telephone at (607) 334-1229 or by email at escrivener@norwichnewyork.net