

Code Enforcement Division

1990 Barret Court, Suite B

Henderson, KY 42420

Phone: (270) 831-1277

Fax: (270) 831-1271

Email: code@cityofhendersonky.org

CITY OF HENDERSON, KY**CONTRACTOR REGISTRATION APPLICATION**

Business Contact Information			
Company Name:			
Business Address:			
City:	State:	Zip Code:	
Office Phone:		Mobile Phone:	
Email Address:			

Additional Information	
Federal Tax ID Number:	
Kentucky State Tax ID Number:	
Kentucky State License Number: (If Applicable)	
Henderson Occupational License Number:	

Type of Registration you are applying for (please check all that apply):	
Residential General Contractor	
Commercial General Contractor	
Industrial General Contractor	
Specialty Contractor or Subcontractor	
Tradesman (State Licensed)	

SPECIALTY CONTRACTORS – SELECT TRADES OR CRAFTS THAT YOU PERFORM:

<input type="checkbox"/> Alarms/Security	<input type="checkbox"/> Drywall	<input type="checkbox"/> Flooring	<input type="checkbox"/> Paving/Surfacing	<input type="checkbox"/> Signage	<input type="checkbox"/> Other (List below)
<input type="checkbox"/> Concrete/Masonry	<input type="checkbox"/> Electrical	<input type="checkbox"/> Framing	<input type="checkbox"/> Plumbing	<input type="checkbox"/> Sprinkler Systems	<input type="checkbox"/> Tile
<input type="checkbox"/> Decks	<input type="checkbox"/> Excavation/Grading	<input type="checkbox"/> HVAC	<input type="checkbox"/> Pools	<input type="checkbox"/> Trim Carpentry	<input type="checkbox"/> Wall Covering
<input type="checkbox"/> Demolition	<input type="checkbox"/> Fencing	<input type="checkbox"/> Insulation	<input type="checkbox"/> Refrigeration	<input type="checkbox"/> Welding	
<input type="checkbox"/> Doors/Windows	<input type="checkbox"/> Fire Protect/Hoods	<input type="checkbox"/> Landscaping	<input type="checkbox"/> Roofing		
		<input type="checkbox"/> Painting	<input type="checkbox"/> Siding		

Attached Documents	
GENERAL LIABILITY INSURANCE CERTIFICATE	
KENTUCKY WORKERS COMPENSATION INSURANCE CERTIFICATE; OR	
AFFIDAVIT OF EXEMPTION FROM WORKERS COMPENSATION INSURANCE	
COPY OF CURRENT KENTUCKY STATE LICENSES FOR THE TRADE YOU PERFORM (If Applicable)	

I certify that I have not received any approval or endorsement by the City of Henderson and agree that I will not represent myself as such. I also certify that all information above is truthful and correct to the best of my knowledge.

Signature: _____

Date: _____

For Office Use

Admin Hold _____ Fee: _____

Reg: # _____