

433 St. Rt. 708 • P.O. Box 30 Russells Point, Ohio 43348 Phone: 937-843-2245 ext. 5 • Fax: 937-843-9956 Email: codeenforcement@russellspoint-oh.gov

OFFICE USE	
Date Received:	
Receipt #	
Registration #	
Date Approved:	

CONTRACTOR REGISTRATION APPLICATION

ANNUAL APPLICATION FEE: \$25.00		
Business Name	Owner's Name	
Address & P.O. Box		
City, State, Zip Code		
Phone Number	Fax Number	
Email Address		
Federal I.D. # or Social Security Number	State License Number (if applicable)	
Number of Employees (Including Yourself)		
Type of Services Offered:		
Liability Insurance Company:		
Agent & Phone Number:		
Workers Compensation Carrier:		
If there are no employees and you are self-insured, in	nitial here	
CONTRACT LABOR AND SUBCONTRACTORS MUST REGISTER SEPARATELY		
INCOME TAX REQUIREMENTS: Any contractor, sub-contractor, installer, landscaper, tradesman, excavator, service provider and or business that works or performs services for compensation inside the incorporated Village of Russells Point may be required to withhold, file and pay a one percent (1%) village income tax. Please refer to the Village of Russells Point Codified Ordinance section 182 for further information. This can be found on the village's website at www.russellspoint-oh.gov.		
Proof of liability insurance and a copy of your current worker's c have employees. Also, your current state or federal license number	compensation certificate must accompany all registration forms if you ers, if required to perform the work performed.	
Per Chapter 1307, annual registration is required and is valid from	January 1 through December 31 each year.	
ability with the enforcement of said regulations. I also certify that the knowledge and belief. If any part of this application is found to be far	of Russells Point codes and ordinances, and to assist to the best of my ne statements in this application are true and correct to the best of my alse, or any of the village's codes or ordinances are knowingly violated, lage, county, or state permits issued to me and/or any company I own	
Name (Please Print)	Title	
Signature	Date	