TOWN OF BEVERLY SHORES

P.O. Box 38, Beverly Shores, Indiana 46301, PHONE (219) 728-6531, FAX (219) 728-6532

APPLICATON FOR CONTRACTOR REGISTRATION

Date		
CompanyName		
Address		
Phone	Fax	Email
Contact Person		Position
The following items ar	re to be submitted	to the Town Clerk:
compensation requirent single limits of five hut and property damage	nents, and a certifi indred thousand do and one million	E Showing compliance with Indiana workers cate of insurance illustrating minimum combined bllars (\$500,000) per occurrence for bodily injury a dollars (\$1,000,000) per accident as well as aundred fifty thousand dollars (\$250,000) per
2) PERFORMANC project made out in fav		housand dollar (\$10,000) bond for each specific Beverly Shores.
,		Three Hundred and no/100 Dollars (\$300.00) ear from the date of issuance.
	in the Town of Be	the and agree to comply with the requirements overly Shores and I fully understand the of them.
Applicant's Signature		
Town Clerk-Treasurer/Date		Building Commissioner/Date

Approved by Plan Commission: September 9, 2013