



PO Box 9, Perkins, OK 74059

Office Use Only: Contractor #: \_\_\_\_\_

(405) 547-2445

(405) 547-5440 FAX

DeputyCityClerk@CityofPerkins.net

### Contractor Registration Application

**Renewal shall be complete upon receipt of all documents listed:**

This form must be accompanied by a copy of a photo ID and current State license for all owners, journeymen and apprentices, as well as current certificate of liability insurance.

**Contractor's registration expires June 30,2024.**

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

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

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Business Owner Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

State License Category:             Electrical     Mechanical     Plumbing

State License #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

#### Journeymen & Apprentices

Name: \_\_\_\_\_ State License #: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Name: \_\_\_\_\_ State License #: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Name: \_\_\_\_\_ State License #: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Name: \_\_\_\_\_ State License #: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Name: \_\_\_\_\_ State License #: \_\_\_\_\_ Exp Date: \_\_\_\_\_

If registration is not renewed with thirty (30) days of expiration date, a new license fee of \$100.00 will be required.

Applicant's Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

New License Fee: \$100.00

Renewal Fee: \$50.00

Amount Paid: \$ \_\_\_\_\_

Please make check payable to the City of Perkins and mail to:

City of Perkins

PO Box 9, Perkins, OK 74059