

**VILLAGE OF LYNWOOD  
CONTRACTOR REGISTRATION APPLICATION  
21460 LINCOLN HIGHWAY  
LYNWOOD, IL 60411  
708-758-6380 FAX – 708-758-7044**

DATE \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_ SOLE OWNER \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PARTNERSHIP \_\_\_\_\_

CITY: \_\_\_\_\_ CORPORATION \_\_\_\_\_

PHONE: \_\_\_\_\_

EMERGENCY PHONE: \_\_\_\_\_

OWNER'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

DRIVER'S LICENSE #: \_\_\_\_\_

SSN: \_\_\_\_\_

TYPE OF CONTRACTOR: \_\_\_\_\_

NUMBER OF EMPLOYEES: \_\_\_\_\_

REFERENCES: \_\_\_\_\_  
\_\_\_\_\_

OTHER CITIES LICENSED IN: \_\_\_\_\_

.....  
INSURANCE AGENT: \_\_\_\_\_ PHONE# \_\_\_\_\_

BOND AGENT: \_\_\_\_\_ PHONE# \_\_\_\_\_  
.....

I UNDERSTAND THE BUILDING CODE & INSPECTION REQUIREMENTS.

SIGNED \_\_\_\_\_

**PLEASE REMIT PAYMENT TO:**  
**LAURIE STARK, COLLECTOR**  
**VILLAGE OF LYNWOOD**  
**21460 Lincoln Highway**  
**Lynwood, IL 60411**