

APPLICATION FOR CONTRACTORS LICENSE TO DO BUSINESS IN THE BOROUGH OF MOOSIC

1. Must show proof of damage and public liability insurance amounting to \$100,000

per person and \$300,000 per occurrence and workmen's compensation insurance, as required by the Commonwealth of Pennsylvania. 2. Name of Applicant: Address: Telephone Number: Trade Name: Business Address: Telephone Number: Applicant must provide proof of any technical school training in contracting work received by the applicants. Applicant must provide proof of the amount of practical experience received in the work field.

Failure of the Applicant to provide all the required information, and necessary proof, or providing false information to the Borough will result in the denial and/or revocation of license.

STATE AND FEDERAL EMPLOYER IDENTIFICATION

JUDGEMENT STATEMENT

	_ 0
Name of Applicant	
Address	
oing business as	
Trade Name	
Swear that there are no outstanding Liens and /or Judgments against my company or me for faulty, unfinished or inadequate work before any court of competent jurisdiction.	
, BEING SWORN ACCORDING TO LAW, DEPOSE AND SAY THAT THE F	FAC
ORTH IN THE FOREGOING STATEMENT ARE TRUE AND CORRECT TO) TF
OF MY KNOWLEDGE, INFORMATION AND BELIEF.	
(Signature of Affi	ant)
WORN AND SUBSCRIBED BEFORE ME THIS DAY	' OI
, 20	
DATE, DISTRICT JUSTICE.	
,	
MY COMMISSION EXPIRES FIRST MONDAY OF JANUARY,	
TI COMMISSION EATIRES FIRST MONDAT OF JANUART,	