

HAZLE TOWNSHIP SUPERVISORS

P.O. BOX 506
HARLEIGH, PA 18225-0506

ZONING 570 455-2030
FAX 570 453-2402

CONTRACTOR'S LICENSE AND PERMIT

PERMIT #: _____

PERMIT COST: \$85.00

DATE: _____

If found working without License/\$400.00

T/A BUSINESS NAME: _____

ADDRESS: _____

City: _____ State: _____ ZIP: _____

OWNER/MANAGER: _____

APPLICANT (If Other) _____

PHONE NO.: _____ FAX: _____

FEDERAL EIN or STATE EIN _____

TYPE OF BUSINESS: _____

INSURANCE CO. NAME: _____

WORKERS COMP. INSURANCE EXPIRATION DATE: _____

APPLICANT'S SIGNATURE: _____



This is to certify that the above named applicant has applied for and received a license/permit to perform work, furnish+/deliver goods+/services for financial gain within Hazle Township for the YEAR OF 2010.

Minimum Liability Insurance required is \$500,000.00

PAYMENT: _____

Zoning/Permit Officer

Cash _____ Check# _____

DATE _____

NOTE: UPON APPLICATION FOR A BUILDING PERMIT, ACT 44 REQUIRES TOWNSHIPS TO MAKE SURE A CONTRACTOR HAS WORKER'S COMPENSATION COVERAGE FOR THEIR EMPLOYEES. PLEASE FORWARD TO THIS OFFICE THE REQUIRED INSURANCE INFORMATION FOR OUR RECORDS. IF YOU MEET THE QUALIFICATIONS FOR A PAOAGHIC REGISTRATION YOU MAY NOT BE ISSUED A LICENSE BY A MUNICIPALITY AS OF 7-1-09, BUT WILL STILL NEED TO PROVIDE PROOF OF INSURANCE WITH YOUR REGISTRATION NUMBER.