TOWNSHIP OF PLAINS

MUNICIPAL BUILDING 126 N. Main Street PLAINS, PA 18705

LICENSE FEE \$125.00 PER CALENDAR YEAR (January to December)

I hereby make application for a COMMERCIAL Contractors License to do work in the Township of Plains (check one of the following): Building Plumbing Electrical Other____ 1 Company Name:____ 2. Principal Officer: 3. Address: ZIP 4. Telephone Number:______Fax#:_____Fax#: 5. EmailAddress:_____ 6. Holding valid licenses_____Years Experience _____ COMPANY:___ 7. INSURANCE AGENT: (Include a copy of your Certificate of Insurance. Certificate Holder: Plains Township 8. Amount of Public Liability Insurance \$_____ 9. Letters of recommendation (If requested) The undersigned applicant verifies that all statements on this application are true and correct. The applicant further states that he understands any false statement made herein are subject to the penalties of 18 PA S.C. Section 4904, relating to unsworn falsification to authorities. Applicants Signature:______Date:_____ Township Use: Receipt#_____ LICENSE #24-