The City of Philippi

Office of City Clerk
P. O. Box 460 • Philippi, WV 26416

APPLICATION FOR CONTRACTOR REGISTRATION FEE

BUSINESS LOCATION ADDRESS

[1] Legal Business or Corporate (Name): _____

[2] DBA, Division or Subsidiary (Name): _____

[3] Owner's Name (If Sole Owner): _____

[4] Address (Street or P. O. Box): _____

[5] City, State and Zip Code: _____

MAILING ADDRESS

[1] Name: _____

[2] Address (Street or P. O. Box): _____

[3] City, State and Zip Code: _____

[4] Name and Phone Number of Contact Person: _____

1. Corporation, Partnership, Individual, or Other — Enter F.E.I.N. in blocks:
   (This is your Federal (IRS) Employer Identification Number)
2. West Virginia Identification Number
3. If You Are The Sole Owner You Must Also Enter Your Social Security Number

4. Description Of Business: ***Check Appropriate Type***

- ☐ General Contractors
- ☐ Concrete Contractors
- ☐ Masonry Contractors
- ☐ Painting Contractors
- ☐ Roofing Contractors
- ☐ Plumbing & Heating Contractors
- ☐ Sheet Metal
- ☐ Sign
- ☐ Exterminating Contractors
- ☐ Excavating Contractors
- ☐ Landscaping Contractors
- ☐ Glass Installation
- ☐ Air Conditioning
- ☐ Carpet Installation
- ☐ Others *(Specify)* _____

Over

5. Two Personal References:

Name	*Address*	*Telephone Number*

6. Bank Reference

Name	*Address*	*Telephone Number*

7. Full Name of Individual Owner, Partners or Officers
(Attach Schedule if Additional Space is Required)

Name	*Address*

8. Signature: _____ Title: _____ Date: _____

Note: The Registration Fee shall be $15.00 per year for a maximum term of one year beginning on July 1st and ending June 30th of the succeeding year.

OFFICE USE ONLY

	Mail _____ Check _____ Money Order _____ Office _____ Cash _____ Check _____ Amount Received _____	Date Sent _____ B & O Tax _____ License Type _____

Attach Check or Money Order Made Payable to ***The City of Philippi*** and Mail To:

The City of Philippi
Office of City Clerk
P. O. 460
Philippi, WV 26416

Phone (304) 457-3700