

**MAYFIELD VILLAGE  
BUILDING DEPARTMENT  
CONTRACTOR REGISTRATION APPLICATION**

6622 Wilson Mills Rd  
Mayfield Village, Ohio 44143  
Ph: 440-461-2213 Fax: 440-442-5077

**FEE: \$ 100.00**

DATE: \_\_\_\_\_

I/WE DO HEREBY MAKE APPLICATION FOR A CERTIFICATE OF REGISTRATION TO ENGAGE IN THE BUSINESS OF: \_\_\_\_\_ WITHIN THE CORPORATION LIMITS OF THE VILLAGE OF MAYFIELD, IN ACCORDANCE WITH THE REQUIREMENTS OF THE CODIFIED ORDINANCES OF MAYFIELD VILLAGE.

I \_\_\_\_\_  
(Applicant)

REPRESENT: \_\_\_\_\_  
(Company) (Company E-mail)

\_\_\_\_\_  
(Company Address)

\_\_\_\_\_  
(Company Phone) (Officer Cell) (Federal I.D. /Social Security)

**FURNISH THE FOLLOWING:**

1. Certificate of Insurance Naming Mayfield Village as Additionally Insured:
- 500 k Bodily injury each person
  - 1 mil Bodily injury each occurrence
  - 200 k Property Damage

2. State Certification: YES  (Submit copy of certification) NO

Name of Company's Officer: \_\_\_\_\_ Title of Officer: \_\_\_\_\_

Training / Schooling From: \_\_\_\_\_ Years at Trade: \_\_\_\_\_

Two (2) Business Associates:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

I do hereby acknowledge that it is my responsibility (company's) to report all jobs to the Building Department and pay all fees according to the current fee schedule of Mayfield Village. Further, I agree to "earmark" all taxes reported to R.I.T.A. "EARNED IN MAYFIELD VILLAGE."

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Daniel Russell, Building Commissioner

**ALL INSPECTIONS REQUIRE 24 HOUR NOTICE**

**SNOWPLOW CONTRACTORS**

**Furnish the following:**

- 1. Make of vehicles**
- 2. License plate numbers**

**Fees:**

**(1) Vehicle      \$10.00**

\_\_\_\_\_

**(2) Vehicles     \$20.00**

\_\_\_\_\_

\_\_\_\_\_

**(3) Vehicles     \$30.00**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**(4) Vehicles     \$40.00**

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