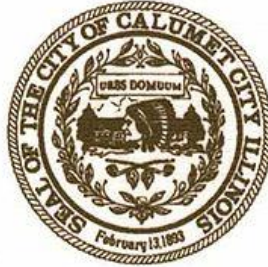


**CITY OF CALUMET CITY ILLINOIS
DEPARTMENT OF INSPECTIONAL SERVICES**

MICHELLE MARKIEWICZ QUALKINBUSH
MAYOR

SHERYL TILLMAN
DIRECTOR OF INSPECTIONAL SERVICES

ANTHONY TYLER
FAIR HOUSING DIRECTOR



670 Wentworth Av
Calumet City, IL 60409
Phone: (708) 891-8120
Fax: (708) 891-2128

ROOFING REGISTRATION FORM

**BUILDING CODES: 2015 IBC, 2006 IMC, 2006 IRC, 2006 PROPERTY MAINTANCE, 2003 IFC,
2011 CHICAGO ELECTRICAL, 2004 IL PLUMBING, 2009 ENERGY CODE, 2010
ACCESSIBILITY CODE, AS WELL AS CALUMET CITY ORDINANCES
\$150.00 FEE JAN 1ST- DEC. 31ST/ \$ 75.00 FEE JULY 1ST- DEC. 31ST**

COMPANY NAME: _____

ADDRESS: _____ PHONE: _____

CITY: _____ STATE: _____ ZIP CODE: _____

TYPE OF BUSINESS: _____ FAX: _____

OWNERS NAME: _____

HOME ADDRESS: _____ HOME PHONE: _____

CITY: _____ STATE: _____ ZIP CODE: _____

REQUIRED DOCUMENTS

1. A COPY OF CURRENT STATE OF ILLINOIS ROOFING LICENSE
2. CERTIFICATE OF GENERAL LIABILITY INSURANCE NAMING THE "CITY OF CALUMET CITY" AS A RESPECTIVE HOLDER
3. \$10,000 SURETY BOND NAMING THE "CITY OF CALUMET CITY"

I UNDERSTANDS THAT THE PRESENTATION OF REGISTRATION IN CONDITIONAL UPON COMPLIANCE WITH ALL CITY ORDINANCES. PERMITS ARE REQUIRED FOR ALL WORK. IT IS THE CONTRACTORS RESPOSIBILITY TO OBTAIN A PERMIT PRIOR TO THE START OF ANY WORK.

DATE: _____ SIGNATURE: _____