



City of Scottsbluff, Nebraska

Contractor Registration Form

Date:			Registration Fee:	\$50.00
			Renewal Fee:	\$25.00
Company Name:			Contractor's Telephone:	
Contractor:			Contractor's Cellular/Mobile:	
Contractor's Mailing Address:			Contractor's Fax:	
City:	State:	Zip:	Contractor's Email:	
Trade or Expertise:				
Number of Employees:	Names of Employees:			
Company Licenses and/or Certificates:				
Employee Licenses and/or Certificates:				
Name of Liability Insurance Company			Address of Liability Insurance Company:	
Amount of Liability Insurance: \$				
Name of Workman's Compensation Insurance:			Address of Workman's Compensation Insurance:	
Amount of Workman's Compensation Insurance: \$				
References: (These references have agreed to be contacted by prospective clients.)	Name:	Address:		Telephone:
	1			
	2			
	3			
	4			
	5			
Other Information:				
I the undersigned agree that the above information is true and correct to the best of my knowledge.				
Contractor's Signature:			Date:	
1. The City does not license contractors.			3. All the information was provided by the contractors.	
2. Any person seeking to register as a contractor will be allowed to do so.			4. The City does not verify nor vouch for the accuracy of the information provided by the contractors.	