

## DEPARTMENT OF BUILDINGS

## 376 ATLANTIC AVENUE • PO Box 189 • EAST ROCKAWAY, NY 11518 Tel: (516) 887-6310 • Fax: (516) 887-6311

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## CONTRACTOR REGISTRATION FOR 2 YEARS

OFFICE USE ONLY			
DATE APPLICATION RECEIVED	EXPIRATION DATE	EXPIRATION DATE	
REGISTRATION NUMBER	FEE\$100 for 2 \	ear Registration	
COMPANY NAME			
BUSINESS ADDRESS			
PHONE # EMAIL #			
LICENSEE NAME OR APPLICANT			
Electrical General Contractor Pl	umbing	Other	
Inc. Village of East Rockaway listed as additional insured on insurance certificates			
Liability Insurance: ACORD 25 Form Worker's Compensation Insurance: Certificate C-105.2 Disability Certificate: DB-120.1 Nassau County Home Improvement License Town of Hempstead Master Plumber or Master Electrician License (if applicable)			
Signature	Date		