

# CONTRACTOR APPLICATION

CITY OF WAYCROSS, GEORGIA  
Department of Community Improvement  
(912) 287-2944, Office / (912) 287-2948, Facsimile  
[www.waycrossga.com](http://www.waycrossga.com)



## INSTRUCTIONS: PLEASE TYPE OR PRINT (IN INK) ALL REQUESTED DATA

(Note: An incomplete application may delay the approval process.)

COMPANY NAME: \_\_\_\_\_

OWNER'S NAME: \_\_\_\_\_

HOME PHONE #: \_\_\_\_\_

BUSINESS PHONE #: \_\_\_\_\_

BUSINESS FAX #: \_\_\_\_\_

MOBILE #: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

ZIP CODE: \_\_\_\_\_

## LICENSE INFORMATION

CLASSIFICATION (Mark Licenses Held)

- \_\_\_\_\_ General
- \_\_\_\_\_ Sign
- \_\_\_\_\_ Plumbing
- \_\_\_\_\_ Electrical
- \_\_\_\_\_ Mechanical
- \_\_\_\_\_ Demolition
- \_\_\_\_\_ Pool
- \_\_\_\_\_ Land Clearing
- \_\_\_\_\_ Fire Sprinkler
- \_\_\_\_\_ Hood Suppression
- \_\_\_\_\_ Underground Utility
- \_\_\_\_\_ Mobile Home Installation
- \_\_\_\_\_ Other \_\_\_\_\_

STATE LICENSE #: \_\_\_\_\_

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

RESTRICTED: ( ) No ( ) Yes

ATTACH COPY OF PICTURE ID AND STATE LICENSE