

# APPLICATION FOR LICENSE — HANOVER TOWNSHIP

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

I hereby make application for a License to do work in the Township of Hanover as:  
Check One Of The Following:

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> MASTER PLUMBER         | <input type="checkbox"/> MASTER ELECTRICIAN     | <input type="checkbox"/> GENERAL CONTRACTOR    |
| <input type="checkbox"/> JOURNEYMAN PLUMBER     | <input type="checkbox"/> JOURNEYMAN ELECTRICIAN | <input type="checkbox"/> JOBBING CONTRACTOR    |
| <input type="checkbox"/> HEATING CONTRACTOR     | <input type="checkbox"/> MASONRY CONTRACTOR     | <input type="checkbox"/> DEMOLITION CONTRACTOR |
| <input type="checkbox"/> FENCE CONTRACTOR       | <input type="checkbox"/> MECHANICAL CONTRACTOR  | <input type="checkbox"/> STEEL ERECTORS        |
| <input type="checkbox"/> ROOFING CONTRACTOR     | <input type="checkbox"/> SIGN CONTRACTOR        | <input type="checkbox"/> SPECIALTY CONTRACTOR  |
| <input type="checkbox"/> PUMP & TANK CONTRACTOR |   |  |

1. APPLICANT: \_\_\_\_\_

2. ADDRESS: \_\_\_\_\_

3. NAME OF FIRM, CORPORATION, ASSOCIATION: \_\_\_\_\_

4. ADDRESS: \_\_\_\_\_

5a. NAME and ADDRESS OF ALL OFFICERS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5b. OWNER or PRESIDENT OF THE COMPANY and ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

6. AGE OF APPLICANT: \_\_\_\_\_ TELEPHONE NUMBER: \_\_\_\_\_

7. PREVIOUS EMPLOYERS/SELF EMPLOYED: \_\_\_\_\_  
\_\_\_\_\_

8. HOLDING VALID LICENSE: \_\_\_\_\_ YEARS OF PREVIOUS EXPERIENCE: \_\_\_\_\_

9. AMOUNT OF PUBLIC LIABILITY INSURANCE: \_\_\_\_\_

10. NAME and ADDRESS OF INSURER: \_\_\_\_\_

11. LETTERS OF RECOMMENDATION RECEIVED FROM: \_\_\_\_\_  
\_\_\_\_\_

12. SIGNATURE OF APPLICANT: \_\_\_\_\_

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

DENIED: \_\_\_\_\_

FEE PAID: \_\_\_\_\_