

**CITY OF ROCKY RIVER  
 21012 HILLIARD BOULEVARD  
 ROCKY RIVER, OH 44116  
 PHONE: (440) 331-0600  
 FAX: (440) 895-2628**

**Registration Application**

Date: \_\_\_\_\_

<b>Fee:</b> \$100 (Renewable Annually)	<b>Liability Insurance must be attached:</b> \$300,000 Minimum (City to be named as "ADDITIONALLY INSURED")
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**The undersigned respectfully requests that a registration be granted for**

\_\_\_\_\_  
 Contractor Signature

in the City of Rocky River, and does hereby consent to be governed in all respects by the Rules and Regulations of said City, and will furnish such bond for the faithful performance of all work under said Rules and Regulations, Laws, and Ordinances as you may determine.

**Type of Contractor:** \_\_\_\_\_

**Soc. Sec. No. / Federal ID No.:** \_\_\_\_\_

**Name of Applicant:** \_\_\_\_\_

**Name of Company:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_

**State:** \_\_\_\_\_

**Zip:** \_\_\_\_\_

**Telephone No.:** \_\_\_\_\_

**Cell No.:** \_\_\_\_\_

**E-mail address:** \_\_\_\_\_

List registrations held in other communities: \_\_\_\_\_

**Note:** Electricians, Plumbers HVAC and Fire Protection contractors shall provide a copy of their State of Ohio Contractors License. (ATTACH COPY OF SAME)

Registration will not be issued until the above requirements have been met.

Any/all Sub-Contractors must also obtain a Registration Certificate with the City of Rocky River.

**Make check payable to the City of Rocky River.** Enclose a self-addressed stamped envelope with your application.

**Registration with RITA (Regional Income Tax Administration) is required when performing work in the City of Rocky River.**

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For office use only:      Issued: \_\_\_\_\_      Registration No.: \_\_\_\_\_  
    Insurance \_\_\_\_\_      Expiration: Dec. 31, 20\_\_\_\_\_