

Construction Code Group
Blumfield Township • Frankenmuth City • Frankenmuth Township
240 W. Genesee Street
Frankenmuth, MI 48734-1398
Phone: (989) 652-3430, x113
Fax: (989) 652-3451
Website: www.frankenmuthcity.com
Fee: \$15.00

CONTRACTOR REGISTRATION FORM

Date: _____ Registration: Number _____

Company Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Telephone: _____ Email Address: _____

Trade: Building Electrical Plumbing Mechanical Other: _____

1. Occupational License Number: _____

Expiration Date: _____

2. Worker's Disability Compensation Insurance Carrier: _____

(a.) Work Comp #: _____ (provide a copy of Workman's Comp Certificate)

(b.) **OR** - Reason for Exemption: No Employee's **or** (provide a 'Disability Exemption Form' can be acquired by calling (517) 322-1195 Compliance & Employer Records Division)

3. Internal Revenue Code, Employer Identification Number: _____

Reason for Exemption: _____

4. Michigan Employment Security Commission Number: _____

Reason for Exemption: _____

Section 23a of the State Construction Code Act of 1972, Act No. 230 of the public acts of 1972, being section 125.1523a of the Michigan Compiled Laws prohibits a person from conspiring to circumvent the licensing requirements of this state relating to persons who are to perform work on a residential building or a residential structure. Violators of section 23a are subject to civil fines.

Applicant's Signature: _____

TO BE PROVIDED: 1.) COPY OF STATE LICENSE 2.) PICTURE ID (I.E. DRIVERS LICENSE, COMPANY I.D.)
3.) WORKMANS COMP. CERTIFICATE **(OR)** PROVIDE A DISABILITY EXEMPTION FORM (PER 2B ABOVE)