



Plainfield Township

6292 Sullivan Trail
Nazareth, Pa. 18064

Phone: 610-759-6944

Fax: 610-759-1999

CONTRACTORS LICENSE APPLICATION

Date: _____

Applicant Name: _____

Applicant Address: _____

Applicant Phone Number: _____

Applicant Email: _____

Company Name: _____

Company Address: _____

Company Phone Number: _____

Company Email Address: _____

Tax ID Number: _____

Fee: \$25.00

Signature of Applicant: _____ Date: _____

Plainfield Township shall be notified within 10 days after a change in control of ownership or management, change of address or trade name.

PLEASE MAKE ALL CHECKS PAYABLE TO PLAINFIELD TOWNSHIP. TO ISSUE A CONTRACTORS LICENSE, A CERTIFICATE OF INSURANCE FOR WORKMEN'S COMPENSATION, NAMING PLAINFIELD TOWNSHIP AS A CERTIFICATE HOLDER, IS REQUIRED WITH THE COMPLETED APPLICATION.