

**BRISTOL BOROUGH**  
**250 POND STREET, BRISTOL, PA 19007**  
**PHONE: 215-785-4501, EXT. 14**  
**FAX: 215-788-5366**

**2017**  
**CONTRACTOR'S REGISTRATION APPLICATION**

**\*Required for all Commercial Work in Bristol Borough\***

Date \_\_\_\_\_

Fee \$100.00 (for the year)

Company Name: \_\_\_\_\_

REGIS. # \_\_\_\_\_

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

PAID \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Name of Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_

**\*\*MUST ATTACH COPY OF INSURANCE RIDER\*\***

\*Have any municipalities refused to issue or have revoked any similar contractor's license to the applicant within the last two (2) years?

Yes \_\_\_\_\_ No \_\_\_\_\_

\*Has the applicant been convicted in the last two (2) years for any crimes or offenses under any federal or state criminal statute or for violation of any municipal ordinance which relate to offenses concerning the applicants work or contracts as a contractor?

Yes \_\_\_\_\_ No \_\_\_\_\_

I agree to abide by the terms and conditions of the "Bristol Borough Contractors Licensing Ordinance" as adopted and that the information stated above is true and correct.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_