

**SOUTH COVENTRY TOWNSHIP**  
**1371 New Philadelphia Road, Pottstown, PA 19465**  
**Phone: 610-469-0444 Fax: 610-469-0520**

**CONTRACTOR REGISTRATION FORM**

Date: \_\_\_\_\_ Registration #: \_\_\_\_\_

REGISTRATION FOR: \_\_\_General Contractor \_\_\_Electrician \_\_\_Plumber \_\_\_HVAC  
*(Check Applicable)*

Name: \_\_\_\_\_ Signature: \_\_\_\_\_  
*(Please Print)*

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

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

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

Contact Person: \_\_\_\_\_ Bus. Phone #: \_\_\_\_\_

Federal or State ID#: \_\_\_\_\_ Fax #: \_\_\_\_\_

Certificate of Insurance #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Worker's Comp. Policy #: \_\_\_\_\_ Pager #: \_\_\_\_\_

*Note: Include an original copy of the Insurance Certificates. South Coventry Township shall be named as policyholder.*

Applicants not obligated to maintain Worker's Compensation Insurance are not permitted to employ any individual to perform work pursuant to building permits issued by South Coventry Township.

Please list employees covered by Worker's Compensation performing work pursuant to building permits issued by South Coventry Township.

Master Plumbers: \_\_\_\_\_

Journeyman: \_\_\_\_\_

Helpers: \_\_\_\_\_

**Registration Fee: \$50.00      Each Additional Trade: add \$30.00      Journeyman: \$10.00**

NOTE: Registration expires 12 months after registration is approved.

Payment: \$ \_\_\_\_\_ Check #: \_\_\_\_\_

Date Insurance Received: \_\_\_\_\_ Registration Card Sent: \_\_\_\_\_

Approved by: \_\_\_\_\_