

| Date: | | |
|-------------|------------|--------|
| Insurance (| Certi | ficate |
| Attached? | (Y) | (N) |
| Fee Paid? | (Y) | (N) |

TOWNSHIP OF ASTON 5021 Pennell Road – Suite 2, Aston, PA 19014 Phone: 610-494-0384 Fax: 610-494-8853 COMMERCIAL CONTRACTOR REGISTRATION 1/1/2017-12/31/2017

| Business Name: Address: | | | | | | |
|----------------------------|----------------|----------------|-------------------|----------------|--|--|
| Phone: | Fax: | | | | | |
| Owner Name & Em | nail Address: | | | | | |
| Please check the typ | e of registrat | ion(s) request | ed (\$100.00 each | 1) | | |
| General Contractor | н | VAC | Electric | Plumbing | | |
| Sprinkler | Solar | _ Land De | evelopment | Other(Specify) | | |
| List name and addr | ess of each jo | urneyman (\$2 | 25.00 each) | | | |
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A Master's Certification is required for each discipline in order to pull a Commercial permit for that discipline. If the general contractor has employees capable of these disciplines, certifications for each must be submitted and verified to avoid separate registration costs.

Return this registration form with the following:

- a copy of a valid license issued by a recognized testing agency, certification and/or journeyman card;
- an original certificate of insurance which includes: property damage, product liability, liability, completed operations and workmen's compensation each of which must have a single occurrence limit with a minimum of \$500,000.00 coverage; and
- a check made payable to Aston Township in the amount of \$100.00 per registration.

I hereby submit a certificate of insurance as described above, attached herewith and made part of this application.

I hereby certify that the statements contained herein and on any attachment submitted herewith are true and correct to the best of my knowledge and belief. I understand if I knowingly make any false statement, I am subject to such penalties as may be prescribed by law or ordinance. By using this registration to perform work or acquire any permit in this jurisdiction, I certify that I am acting as agent for the owner of the property for whom such work is to be conducted and have the authority to act in such capacity by the owner of the property. I hereby authorize you to obtain any information that you require concerning the statements in this registration, which shall remain the property of the Township of Aston.

| APPLICANT | |
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