

# City of Westland

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## Application for Registration or Renewal of Residential Builders, Residential Maintenance & Alteration Contractors

Application for:  Residential Builder  Residential Maintenance & Alteration Contractor

### Qualifying Officer Applicant Information

Name: \_\_\_\_\_ Drivers License # \_\_\_\_\_  
Home Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

### Business Information

Name under which the Business Contractor License: \_\_\_\_\_  
Name of Business if Different from State Issued License: \_\_\_\_\_  
Business Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Business telephone Number: \_\_\_\_\_ Business Tax ID: \_\_\_\_\_  
Date Business Started: \_\_\_\_\_ County: \_\_\_\_\_  
Business Ownership Type:  Sole Ownership  Partnership  Assumed Name  Corporation

### Officer's or Partner's Information

#### Officer #1

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Home Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_  
Michigan Builder's License Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

#### Officer #2

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Home Address: \_\_\_\_\_ Email Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
Michigan Builder's License Number: \_\_\_\_\_

### Signatures

Officer #1: \_\_\_\_\_ Date: \_\_\_\_\_  
Officer #2: \_\_\_\_\_ Date: \_\_\_\_\_  
Officer #3: \_\_\_\_\_ Date: \_\_\_\_\_

