



520 3rd St., Suite 230, Brookings, SD 57006
Phone: (605) 692-6281
www.cityofbrookings.org

License Application Residential Contractor

BUSINESS

Business Name: (as will appear on license) _____
Business Address: _____
Street _____
City _____ State _____ ZIP Code _____
Business Phone: () _____
Business Email: _____
Excise Tax Number: (XXXX-XXXX_ET format) _____

CONTACT PERSON

Contact Name: _____
Last _____ First _____ Middle _____
Home Phone or Cell: () _____
Email: _____

Requirements for Residential Contractors License

- Application
- Fee: \$75
- Excise Tax Number
- Copy of Worker's Compensation Insurance.
- Copy of current Liability Insurance Certificate stating the sum of not less than \$500,000 for each occurrence.

Applicant Signature

By signing below, I, the applicant, hereby agree that should the license be granted, I will comply with all requirements of the ordinance in effect. (Municipal Code of Ordinances, Chapter 22)

Applicant's signature: _____

All licenses run from January 1st to December 31st of the current year.

License must be renewed in order to continue any current project or prior to starting any new project.

NOTE: If the license is not renewed prior to the expiration date and the contractor has a job in progress, the license fee will be double the fee established by Resolution of the City Council.

License fee is not refundable. License is not transferable.

Return completed application to:

City Engineers Office, 520 3rd Street, Suite 140, Brookings, SD 57006
Phone: (605) 692-6629

To be completed by City of Brookings

Fee: \$75 _____
Paid by _____ License No. _____
Building Services Dept. Representative _____ Date _____