



CONTRACTOR'S LICENSE REGISTRATION

Date _____

CONTRACTOR INFORMATION

Name _____ Phone # _____
Address _____ City _____ Zip _____
Contractor License No _____ Email _____

PROJECT DETAILS

Project Address _____ City _____ Zip _____
Description of project _____
Development _____
Owner's Name _____ Owner's Phone # _____

CONTRACTOR SIGNATURE

I certify I am licensed by the State of Utah, Division of Professional Licensing.

Contractor Signature

Date

SUMBITTAL & FEES

Submit this form by emailing it with a copy of your contractor's license to ruby@elkridgecity.org.
There is a \$12 fee to process the registration which will be included with the building permit fees.

SUBMITTAL INFORMATION (For Office Use Only)

Received by: _____ Date: _____
Payment Method (\$12 Annual Fee): Cash _____ Check(include check #) _____
Receipt # _____