

GRADY COUNTY CODE ENFORCEMENT
250 N. BROAD ST. BOX 6 ~ CAIRO, GEORGIA 39828
(229) 377-8857 FAX # (229) 377-6947

REQUIREMENTS FOR CONTRACTOR'S REGISTRATION

1. Picture ID
2. Copy of a STATE OF GEORGIA CONTRACTORS LICENSE if applicable
3. Copy of OCCUPATIONAL / Business License
4. The CONTRACTORS APPLICATION must be completely filled out.
5. SPECIALTY CONTRACTORS - If this is your first job in Grady Co. you must see Mr. Harrison before your application can be processed. He is available between 8:00 and 10:00 a.m., Monday thru Friday. An appointment can be made by calling the office at 229-377-8857 if you are unable to come in at that time.

ACKNOWLEDGEMENT:

I hereby acknowledge I have read and understand Grady County Code Enforcement requirements for Contractor Registration.

Contractors Signature

Print Name

Date

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CONTRACTOR APPLICATION

NAME OF LICENSED PERSON: _____
(LAST) (FIRST) (M.I.)

LICENSED CONTRACTOR: _____ INDIVIDUAL OR _____ QUALIFYING AGENT

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

DATE OF BIRTH: _____ / _____ / _____ SSN: _____ / _____ / _____
(MO) (DAY) (YEAR)

COMPANY NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ / _____ / _____ CELL: _____ / _____ / _____

FAX: _____ / _____ / _____ E-MAIL: _____

INSURANCE CO. NAME: _____ AGENT: _____

POLICY #: _____ AMOUNT OF COVERAGE: \$ _____

CHECK TYPE OF REGISTRATION APPLIED FOR:

___ RESIDENTIAL/BASIC (RB) ___ RESIDENTIAL/LIGHT COMMERCIAL (RL)

___ GENERAL CONTRACTOR (GC) ___ GENERAL CONTRACTOR LIMITED (GCL)

___ ELECTRICIAN RESTRICTED (ER) ___ ELECTRICIAN UNRESTRICTED (EU)

___ CONDITION AIR CONTRACTOR (MR) ___ CONDITION AIR CONTRACTOR (MU)

___ PLUMBER RESTRICTED (PR) ___ PLUMBER UNRESTRICTED (PU)

___ MOBILE HOME INSTALLER RESTRICTED (SR) ___ MOBILE INSTALLER UNRESTRICTED (SU)

___ GAS CONTRACTOR ___ SPECIALTY _____

STATE LICENSE NUMBER: _____ ATTACH A CURRENT COPY

_____/_____/_____
APPLICATION DATE

APPLICANT'S SIGNATURE