

Signature of Applicant or Owner_



P.O. Box 682

Valley, NE 68064 Phone: 402-359-2251 Ext. 306 Fax-402-359-2610 www.valleyne.org

Business Hours 9 am - 5 pm M-F

Official Use Only	
Contractor Registrat	ion for 20
□ Check □ Cash	□ Credit Card
Check#	-

CONTRACTOR REGISTRATION

Verify the following information	on:			
	Date:			
Type of Business				
Business Name				
Address		(4)		
City		State	Zip	
Phone #		Fax #		
Mobil #				
		E-MailOptional		
Applicants or Owners Name (p	olease print)			
		man: Apprentices:		
Submit a co	opy of a certified	license for each registrant		
Insured by:		submit a copy of curren	it insurance	
Please place a check on the line	e next to the regi	stration you are applying for:		
Electrical Contractor	\$25.00	7 727 0	\$25.00	
Electrical Journeyman	\$10.00		\$10.00	
Electrical Apprentice	\$5.00	Water service & Drain layer_	\$25.00	
Plumbing Contractor	\$25.00	Lawn Sprinkler Contractor	\$25.00	
Plumbing Journeyman	\$10.00	General Contractor	\$25.00	
Plumbing Apprentice	\$5.00	(type of contractor))	
Mechanical Contractor	\$25.00	Remodeling Contractor	\$25.00	
Mechanical Journeyman	\$10.00	Miscellaneous	\$5.00	
Mechanical Apprentice	\$5.00			
reported on the application within 15 days of	of such change. I agree	will notify the City of Valley of any changes in to conform strictly to the Ordinances of the Cit lations and orders of the cities Building Officia	ty of Valley,	