

HOW TO: CONTRACTOR REGISTRATION

Go to: http://www.cityoflawrence.org/public-works

At the top of the page click on **CONTRACTOR REGISTRATION ICON** and complete the form by filing out <u>all</u> required fields.



❖ If you have a current/unexpired Indianapolis/Marion County license,

- Upload a copy the valid license and submit the form.
- Your registration fees will be waived, after we confirm the validity of the license.
- Once approved, you will receive an email with your registration number and expiration date.
- Registration will expire the same date as when your Indianapolis/Marion County license expires.

❖ If you do not have a current/unexpired Indianapolis/Marion County License

- Upload a copy of the General Liability Insurance Certificate and submit the form.
- o DPW staff will review and process the application
- Once approved you will get an email with a link to pay the registration fee.
- o Registration fees is \$150.00 and is valid for 2 years from the date of issuance.
- Once payment is confirmed, you will receive an email with your registration number and expiration date.

General Liability Insurance Certificate Requirements

- a. Shall have minimum of \$500,000 for each occurrence of death or bodily injury.
- b. Shall have minimum \$100,000 for each occurrence of property damage or shall have combined single limit coverage, which covers both bodily injury and property damage, minimum \$500,000 per occurrence.
- c. Shall have the policy number.
- d. Shall include City of Lawrence as a Certificate Holder.
- e. Shall identify effective and expiration dates of the coverage.
- f. Shall name the sole proprietor, partnership or corporation as the insured.
- g. Shall list the name, address and phone number of the insurance agent.
- h. Shall not limit coverage to a single job
- i. Shall notify the Building Commissioner, in writing, at least 15 days prior to cancellation.

If there are any questions do not hesitate to contact our office at 317-545-8787 or email permits@cityoflawrence.org