



## **REQUIREMENTS FOR HOME IMPROVEMENT CONTRACTORS LICENSE**

Any person applying for a home improvement license in the City must meet the following requirements:

- a. Fill out application in full and have it notarized.
- b. Must provide the Licensing, Inspections and Permits Department a copy of the Home Improvement Registration Certificate from the PA Attorney General's Office.
- c. Must provide the Licensing, Inspections and Permits Department a Copy of the applicants Photo Identification
- d. Must provide a letter of recommendation
- e. Must provide the Licensing, Inspections and Permits Department a copy of General Liability Insurance
- f. Required fee: \$150.00



**DEPARTMENT OF LICENSING, INSPECTIONS AND PERMITS**

CITY HALL • 340 NORTH WASHINGTON AVENUE • SCRANTON, PENNSYLVANIA 18503 • PHONE: 570-348-4193 • FAX: 570-348-4171

**HOME IMPROVEMENT CONTRACTOR APPLICATION**

(Application must be notarized)

DATE: \_\_\_\_\_

NAME OF APPLICANT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CONTACT NUMBER: \_\_\_\_\_

NAME OF BUSINESS/COMPANY: \_\_\_\_\_

\_\_\_\_\_

ADDRESS OF BUSINESS/COMPANY: \_\_\_\_\_

WORK PHONE NUMBER: \_\_\_\_\_ FAX: \_\_\_\_\_

TYPE OF BUSINESS ORGANIZATION:

- SOLE PROPRIETOR       PARTENERSHIP       CORPORATION       LLC

FEDERAL ID NUMBER: \_\_\_\_\_

SCRANTON SINGLE TAX OFFICE BUSINESS ACCOUNT NUMBER (Required): \_\_\_\_\_

APPLICANT'S POSITION WITH FIRM/COMPANY: \_\_\_\_\_

NUMBER OF YEARS COMPANY/INDIVIDUAL HAS BEEN IN THE CONTRACTING BUSINESS:

\_\_\_\_\_

PRINCIPAL TYPES OF CONSTRUCTION PERFORMED: \_\_\_\_\_

\_\_\_\_\_

APPLICANT'S (INDIVIDUAL) PRACTICAL TRAINING EXPERIENCE      IN THE CONTRACTING  
BUSINESS (ATTACH REFERENCES IF NEEDED):

\_\_\_\_\_

\_\_\_\_\_

APPLICANT'S (INDIVIDUAL) TECHNICAL TRAINING EXPERIENCE (ATTACH REFERENCES IF NEEDED):

\_\_\_\_\_  
\_\_\_\_\_

IS THE APPLICANT INSURED? YES NO

\*ALL APPLICANTS MUST SHOW PROOF OF PROPERTY DAMAGE AND PUBLIC LIABILITY INSURANCE AMOUNTING TO \$500,000.00 PER PERSON AND \$1,000,000.00 PER OCCURANCE.

**\*\*APPLICANT MUST PROVIDE A COPY OF THE HOME IMPROVEMENT CERTIFICATE FROM THE PA ATTORNEY GENERAL'S OFFICE. \*\***

\_\_\_\_\_

I swear or affirm that my statements and answers above are true and complete to the best of my knowledge and belief. I understand that any falsification on this application may result in my license application being denied. I also realize that I will be subject to criminal penalties provided by 18 PA.C.C 4903 and 4904 if I have provided false answers and statements.

\_\_\_\_\_  
Signature of Contractor or Authorized Agent Date

County of \_\_\_\_\_ State of \_\_\_\_\_

I, \_\_\_\_\_, being duly sworn, depose and say that he/she is \_\_\_\_\_ of \_\_\_\_\_

And the answers to the foregoing questions and all statements therewith are true and correct.

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

**OFFICIAL USE ONLY**

APPROVED: YES NO \_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF DIRECTOR/BCO LICENSING, INSPECTIONS & PERMITS

COMMENTS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_