



Village of Ashville
P.O. Box 195
200 East Station Street
Ashville, OH 43103



Office: 740/983-6367 Ext. 1 • Fax: 740/983-4703
[Email: atrimmer@ashvilleohio.gov](mailto:atrimmer@ashvilleohio.gov)

Building Department

CONTRACTOR/SUBCONTRACTOR REGISTRATION

If you desire to operate as a contractor/subcontractor in the Village of Ashville, you are required to submit the enclosed APPLICATION FOR CONTRACTOR/SUB-CONTRACTOR REGISTRATION accompanied by the required documents and fee(s) **ANNUALLY**.

Requirements to obtain a "Contractor/Sub-Contractor Registration" are as follows:

- The fee required to accompany the application is seventy-five dollars (\$75.00) **PER** trade made payable to the *Village of Ashville*.
- Evidence of a current license issued by the Ohio Construction Industry Examining Board (OCIEB) is required for registration as Plumbing, Electrical, HVAC, Refrigeration, and Hydronics contractors, Ohio Revised Code Chapter 4740.
- Evidence of a current license issued by the Ohio State Department of Health is required for registration as asbestos, lead or radon abatement and/or testing contractors.
- Certificate of Insurance indicating the General Liability coverage limits with a 10-day cancellation notice. General Liability insurance, including but without limitation, for bodily injury in the amount of one hundred thousand dollars/three hundred thousand dollars (\$100,000/\$300,000), and for property damage in the amount of at least fifty thousand dollars (\$50,000) or such greater amounts as permitted by Ohio R.C. 4740.06(B)(4).
- Proof of current State of Ohio automobile coverage for the contractor's vehicle(s) for the period the contractor is registered to work in the Village, Ordinance No. 2007-09.
- Copy of valid Ohio driver's license.
- Completed bond form with seal and attached power of attorney for **EACH** trade. The amount of the Registration Bond is ten thousand dollars (\$10,000.00) under Ordinance 1321.
- Income tax registration with RITA (Form 48) (unless currently registered).
- Self addressed stamped envelope (not necessary if registering in person).

* The penalty for starting work prior to obtaining a "Contractor/Sub-Contractor Registration" is one hundred dollars (\$100.00).

For your convenience the Building Department has attached the following:

- An APPLICATION FOR CERTIFICATE OF CONTRACTOR/SUBCONTRACTOR REGISTRATION (you must list up to three agents who are able to pull permits under your company's name.)
- A Village of Ashville REGISTRATION BOND form.
- INCOME TAX REGISTRATION (if not previously registered with the Village of Ashville)

The enclosed documents contain specific information and instructions. Please read each form completely and carefully.



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Building Department

CONTRACTOR / SUB-CONTRACTOR REGISTRATION

Date: / / _____

For Internal Use	
Registration # _____	Registration # _____
Registration # _____	Registration # _____

Applicant Name:				
Address:				
	Number & Street	City/Village	State	Zip Code
Phone:		Cell Phone		
Company Name (DBA):				
Address:				
	Number & Street	City/Village	State	Zip Code
Phone:		Cell Phone:	Fax:	
Email Address:				
Federal ID #		State Corporation #		
Valid Driver's License Number of applicant:		Submit a copy with this application.		
Check the trade for which the application is being made:				
<input type="checkbox"/> General Building	<input type="checkbox"/> Electrical	<input type="checkbox"/> HVAC (Hydronic)		
<input type="checkbox"/> Fire Suppression Commercial	<input type="checkbox"/> Plumbing	<input type="checkbox"/> Other (describe below)		
Contractors MUST provide a copy of their State License in order to obtain Electrical, Plumbing and/or HVAC Registrations for Commercial Permits				
Authorized Agents				
Agent # 1				
Agent # 2				
Agent # 3				

All registrations Expire on December 31st of each year.

I hereby indicate that all of the information is true to the best of my knowledge, that I am at least 18 years of age, able to interpret construction plans and specifications, and able to comply with the requirements of the Village of Ashville Ordinances/Resolutions.

 Print Applicant's Name
 Approved _____ Disapproved _____
 Date: _____

 Signature of Applicant

 Signature of Building Inspector



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BOND NO.

(REQUIRED)

Ashville, Ohio

REGISTRATION BOND

KNOW ALL MEN BY THESE PRESENTS, THAT WE, _____

doing business as principal, hereinafter referred to as the principal, and, _____

as surety, hereinafter referred to as the surety, are held and firmly bound unto the **Village of Ashville**, in the sum of Ten Thousand Dollars (\$10,000) for payment of which, well and truly to be made we bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents.

Witness our hand and seals this _____ day of _____, 20_____.

The conditions of the above obligations are such that:

Whereas, the said principal made application to the **Village of Ashville** for a license/registration in accordance with Ordinance 2010-02 of the Village of Ashville Chapter 1321.03 Codified Ordinances, as a contractor to engage in the business of:

- _____ General Building
- _____ Plumbing
- _____ Fire Suppression commercial
- _____ HVAC (Hydronics)
- _____ Electrical
- _____ Other, provide details on line below

within the **Village of Ashville** during the calendar year of _____ in accordance with the provisions of Code of Ordinances of the **Village of Ashville**.

Now therefore, if the said principal shall faithfully observe all the duties and discharge all the obligations incurred by him during said registration period under the ordinances of the **Village of Ashville** applying to the construction, alterations, repair, addition to, subtraction from, reconstruction or remodeling of any building, structure or appurtenance thereto, or any part thereof, and the ordinances applying to underground construction and/or work within the public right of way, and all the lawful orders of the **Village of Ashville**, issued under said ordinances, then this obligation shall be void, otherwise, the same shall be and remain in full force and effect; the undersigned agreeing and consenting that this undertaking shall be for the benefit of any party damaged by the principal's failure to comply with the duties, terms, conditions, provisions and requirements of the ordinances of the **Village of Ashville** applying to such work and the lawful orders of the **Village of Ashville** issued under such ordinances, as well as for the benefit of the obligee herein, and either or both may bring action on the bond, but said action must be commenced within two years after expiration of the principal's registration.

SEAL

PRINCIPAL

SURETY

(SIGNATURE OF AGENT EXECUTING BOND)

NOTE: ATTACH POWER OF ATTORNEY

(If this Bond is executed by any agent for a Principal or a Surety, such Agent must affix a copy of his Power of Attorney or other evidence of authority to execute the Bond. If the Surety is a non-resident corporation of the State of Ohio, its authority to do business in Ohio must, likewise, be attached hereto).

Municipality _____

Business Type

- Corporation
- S-Corp
- LLC
- Partnership
- Non-Profit
- Estate & Trust
- Sole Proprietor / LLC

Reason for Registration

- Courtesy withholding for an employee's resident municipality
- Doing business within the municipality this year (temporary)
Approx. # of days _____ Start Date _____
- Business with a fixed location
Date business began at this location _____

Company Information (List physical address of work performed within this municipality)

Name: _____	Federal ID #: _____
Address: _____	SSN : _____ (required if sole proprietor)
City/State/Zip: _____	
Mailing Address (for withholding tax forms / if different from above) _____ _____	Mailing Address (for net profit tax forms / if different from above) _____ _____

***Please note that your Federal Identification Number will serve as your RITA account number.**

Filing Status:

- Calendar year
- Fiscal year / month ending _____

Do you have any employees? Yes No

Number of employees at RITA location _____

My withholding is filed under a 3rd party account (PEO or common paymaster) Yes No
If yes, list Federal ID # _____

Monthly gross payroll at RITA location \$ _____

I am a small employer (under \$500,000 in gross revenue during previous year) Yes No

Contractors

I am a contractor Yes No

Will you be using sub-contractors? Yes No

If yes, complete page 2.

Total contract amount of the project \$ _____

The Information Hereby Submitted is True and Correct.

Print Name Title Phone Number

Signature Date

Please complete and sign this Registration Form and return within 10 business days. Please be advised that failure to timely register with RITA may result in delays in the processing of any required income tax filings or may result in future penalty and interest charges, if applicable. If you have any questions please contact the Registration Department at the number below.

Mail to: RITA
ATTN: BUSINESS REGISTRATION
P.O. BOX 477900
BROADVIEW HEIGHTS, OH 44147-7900

ritaohio.com

Call: 800.860.7482, ext. 5008
TDD: 440.526.5332
Fax: 440.526.3136

Sub-contractor Name / Address	_____	\$
	Contact Name	Contract Amount
	Phone Number	Estimated Start Date
	EIN or Social Security #	Trade
Sub-contractor Name / Address	_____	\$
	Contact Name	Contract Amount
	Phone Number	Estimated Start Date
	EIN or Social Security #	Trade
Sub-contractor Name / Address	_____	\$
	Contact Name	Contract Amount
	Phone Number	Estimated Start Date
	EIN or Social Security #	Trade
Sub-contractor Name / Address	_____	\$
	Contact Name	Contract Amount
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	EIN or Social Security #	Trade
Sub-contractor Name / Address	_____	\$
	Contact Name	Contract Amount
	Phone Number	Estimated Start Date
	EIN or Social Security #	Trade
Sub-contractor Name / Address	_____	\$
	Contact Name	Contract Amount
	Phone Number	Estimated Start Date
	EIN or Social Security #	Trade
*If more space is needed, you may attach a separate schedule that includes ALL of the required information listed above.		