

Springfield Township  
Contractor Registration Form

(Please Print)

Name of Company: \_\_\_\_\_

Address: \_\_\_\_\_

City / State / Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

License Holder: \_\_\_\_\_

License Number: \_\_\_\_\_

License Expiration: \_\_\_\_\_

List all authorized persons to sign for permits under your license:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\$25 FEE DUE AT TIME OF REGISTRATION  
REGISTRATION EXPIRES DECEMBER 31, 2008