

License Year: May 2021-April 2022

**CITY OF OGLESBY**  
**CONTRACTOR LICENSE APPLICATION**  
Ordinance No. 1012-050718

1. Type of license requested: \_\_\_\_\_
2. Applicant information: (Must be an individual and not a business. If applicant is to be the designated licensed individual contractor for a specific business, the business name must be identified in #3 and #4).

Name: \_\_\_\_\_ Title: \_\_\_\_\_

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

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

3. Business Name: \_\_\_\_\_
4. Business Address: \_\_\_\_\_
5. Have you ever been convicted of a criminal offense or ordinance violation (other than traffic or parking offenses) in any jurisdiction? \_\_\_\_\_
6. If yes, list the offense, date of conviction and place where convicted: \_\_\_\_\_

\_\_\_\_\_

I, hereby agree to operate under the above-described license in accordance with all Regulations and conditions imposed by the laws of the State of Illinois and the laws, ordinances, and regulations of the City of Oglesby. I understand that any false statements could result in the revocation or denial of license.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**Please Note:** You may not operate prior to receiving your current license. This application will be considered complete only when all sections have been completed in their entirety. **FEE: \$100**

**Checks should be made payable to:** City of Oglesby  
**Mail or deliver to:** Oglesby City Clerk, 110 E Walnut Street, Oglesby, IL 61348  
**Submit the following:** Completed application, payment, copy of bond and proof of insurance.