Dear Contractor:

The Cedar Lake Town Council passed Ordinance No. 566 requiring all contractors to be registered to conduct business in the Town of Cedar Lake. This ordinance became effective on January 19, 1993. An Ordinance Amending Town Ordinance No. 566 became affective on July 19, 2005. Ordinance No. 931. Before a Certificate of Registration is issued by the Town to any Applicant, the Town shall require valid proof of worker’s compensation coverage.

If you intend to register with the Town you must submit the following documents to us:

1. A completed application;
2. $150.00 first time registration fee; ($50.00 renewal)
3. Copy of recorded Lake County Bond, the recording stamp must appear on the copy you submit to us;
4. Copy of Certificate of Insurance with $1,000,000 coverage & Workers Compensation;
5. Copy of valid Lake County License (General Contractors only) (Lake County Plan Commission number is 219-755-3700. Their office can assist you when applying for your county license.)
6. Photo ID or copy of Drivers license.

All items listed above must be submitted together. If your documents are incomplete, your application will not be accepted.

If you were licensed the previous year and need to renew, an application can be picked up at the Town Hall. Renewal application will be mailed to all licensed contractors in the month of December.

If you have any questions please call the Building Department

Sincerely,
Building Department
TOWN OF CEDAR LAKE
APPLICATION FOR CERTIFICATE OF REGISTRATION FOR
CONTRACTORS AND SUBCONTRACTORS
(New Contractors only)

Date ___________________________

Name of Business _______________________________________________________

Licensee Name __________________________________________________________

Social Security or Federal ID # _____________________________________________

Address _________________________________________________________________

City __________________________________ State ________________ Zip __________

Nature of Business _________________________________________________________

Business Phone # ______________________________ Fax # _______________________

Lake County Recorded Bond # ___________________ Expiration Date _______________

Name of Bond Insurer _____________________________________________________

Lake County License Number _______________________________________________

Business Owner(s) -- List names, resident addresses and telephone number of all owners.

________________________________________________________________________

________________________________________________________________________

Previous Work References/Work to be completed -- References must be residents of Cedar Lake
who are not related to the applicant, or in the case of a corporation, its duly designated officers.

1. Name ______ Address ______ Phone ______

2. Name ______ Address ______ Phone ______

______________________________
Signature of Applicant

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