

Annual Application for Excavation Contractor Registration

Principal owner of business _____

Address of business owner _____

Telephone number of business owner _____

Full name of business _____

Address of business _____

Business telephone number _____ Fax number _____

Email address _____

Requirements are as follows

- Certificate of insurance for combined liability in the minimum amount of \$100,000 bodily injury for each individual, \$300,000 bodily injury total accident, \$100,000 property damage arising from any one
- Continuous surety bond made out to the City of Galesburg in the amount of \$2,500. A minimum of 30 days notice must be provided to the City Clerk's office before this bond may be canceled.

The undersigned certifies that all information in this statement is true and complete.

Signature

Title

Date