

# CITY OF GALESBURG

City Clerk's Office

Operating under Council Manager form of Government Since 1957

---

## Tree Contractor Registration Form (Please print)

Company Name \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Business Phone \_\_\_\_\_ Cell phone \_\_\_\_\_ Fax \_\_\_\_\_

Email Address \_\_\_\_\_

Owner Name \_\_\_\_\_ Owner Phone \_\_\_\_\_

Owner Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Liability Insurance Provider \_\_\_\_\_

Workers Compensation Provider \_\_\_\_\_

Bond Provider \_\_\_\_\_

- An annual registration fee: **\$75.00**. Registration(s) expire on December 31<sup>st</sup> regardless of issue date.
- Certificate of Insurance for liability in the minimum amount of \$100,000/\$300,000 The City of Galesburg ***must be*** listed as additional insured **when** work is performed for the City of Galesburg.
- Form must be **completely** filled out before the license will be issued to the company.

**By my signature below, I hereby certify that I understand that any person or company working for me as a subcontractor must be registered with the City and is not considered my employee.**

**By my signature below, I hereby certify and attest that I have reviewed the information provided above and that such information is true and accurate, I understand that providing false information constitutes a violation of Galesburg Municipal Codes.**

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Date)