



**LICENSE APPLICATION
TREE TRIMMER**

Applicant Name: _____ Phone: _____

Address: _____ E-Mail: _____

Business Name: _____

Partners, if applicable: _____

Date of Incorporation, if applicable: _____

Officers and Directors of Corporation, if applicable: _____

Certificate of Insurance

The application under this division shall be accompanied by a certificate of insurance evidencing the fact that applicant has in force a public liability and property damage insurance policy or policies covering the proposed work or contract with limits of **five hundred thousand dollars (\$500,000) bodily injury and one hundred thousand dollars (\$100,000) property damage**, which policy or policies shall name the City as an additional insured.

\$100.00 Registration Fee to be paid one time only as long as a current Certificate of Insurance and a current License Bond Certificate are on file with the City

The undersigned hereby states that the information contained in this application is true to his/her own knowledge and set forth of his/her own free will.

Signature

Date

For Office Use Only

Insurance Expiration Date: _____