



Recorder's Office

Application for Contractor License

This application must be submitted with a copy of the WV Contractor License and a fee of \$90.

Official Business Name: _____

Doing Business As: _____

Ownership Type: Assoc. Corp. Individual Gov. LLC LLP PLLC Partnership Business

Type: Contractor (Submit Form C) Subcontractor for: _____

FEIN/SSN: _____

Registered with the WV Secretary of State: Yes No

Physical Address Information

_____ Address 1 _____ Address 2 _____

_____ City _____ State _____ Zip Code _____ Country _____ County _____

Mailing Address Information Same as Physical Address? Yes No

_____ Address 1 _____ Address 2 _____

_____ City _____ State _____ Zip Code _____ Country _____

Operation in Granville

_____ Operating in Granville since _____

Email application to csypolt@townofgranvillewv.gov and pay on-line at townofgranvillewv.gov or send application with a check to Town of Granville PO Box 119 Granville, WV 26534

