



2017 Contractors Registration Application

Name: _____

Company Name: _____

IDPH License Number(s) _____ Exp. date: _____

Address: _____

City: _____ State: _____ Zip: _____

County: _____ Email: _____

Phone: _____ Fax: _____

Mailing address (if different from above) _____

I agree to comply with current Grundy County Codes:

Signature

Date

Please remit application and \$50 fee to the Grundy County Health Department located 1320 Union Street, Morris, Illinois 60450.

Payment by cash, credit (in person only), money order or check. Checks payable to Grundy County Health Department.

All fees are Non-refundable.