



CITY OF SOUTH LYON

BUILDING DEPARTMENT

335 S. WARREN

SOUTH LYON, MI 48178

PHONE: 248-437-5255

FAX: 248-486-0049

CONTRACTOR REGISTRATION FORM

DATE: _____

COMPANY NAME: _____

COMPANY ADDRESS: _____

PHONE: _____ FAX: _____

EMAIL: _____

CIRCLE ONE:	PLUMBING	MECHANICAL	ELECTRICAL	BUILDING
	\$15.00	\$15.00	\$15.00	\$15.00

LICENSEE NAME: _____

LICENSE NUMBER: _____

LICENSE EXPIRATION DATE: _____

*****NOTE: COPIES OF DRIVERS LICENSE (FRONT & BACK) AND CONTRACTOR LICENSE(S)
MUST BE INCLUDED WITH THIS FORM*****

PLEASE MAKE CHECK PAYABLE TO: CITY OF SOUTH LYON