



651-747-3900
3880 Laverne Avenue North
Lake Elmo, MN 55042

CONTRACTOR LICENSE APPLICATION

Application documents will be reviewed for compliance with the requirements of City Code Chapter 115 governing Building Contractors doing business in the City of Lake Elmo. The non-refundable Application Fee of \$50.00 covers the combination of all licenses for the year. Checks should be made payable to the City of Lake Elmo and presented/mailed with this application form to the above address. Documentation of general liability insurance of not less than \$100,000, property damage insurance of not less than \$50,000 and workers compensation coverage as required by law must be submitted with application.

License(s)* Applied For: Driveways
The City currently only requires a license for driveways

Business Name _____ Contact Person _____

Business Address _____

City _____ State _____ Zip _____ Phone _____

Business Owner Name: _____

Business Owner Address _____

City _____ State _____ Zip _____ Phone _____

Minnesota Tax ID# _____ Federal Tax ID # _____ E-Mail _____

If Minnesota tax identification number is not required, please explain:

DATA PRIVACY NOTICE: The data you supply on this form will be used to assess your qualifications for the license. You are not legally required to provide this data, but we will not be able to grant the license without it. If a license is granted, the data you have supplied will constitute a public record and copies may be issued to anyone requesting them. The required data allows us to distinguish you from other applicants; to identify you in our license files; to verify that you are the person who applied for the license to contact you if any additional information is required; to determine whether you meet any minimum age requirements; and to determine if any conviction you may have on record might affect you suitability as a license holder. Your residence address and telephone number will be considered public data unless you request this information to be private and provide an alternative address and telephone number. (See below)

Please sign below to indicate that you have read this notice.

Signature: _____

To request that your residence address and telephone number be considered private data, you must list your alternative address and telephone number below:

Address: _____ Telephone Number: _____

FOR OFFICE USE ONLY

Building Official: _____ Date: _____