VILLAGE OF ASHWAUBENON
APPLICATION FOR BUILDING CONTRACTOR'S LICENSE
2155 HOLMGREN WAY, ASHWAUBENON, WI 54304-4605

New License & Renewal: $ 100.00 for three (3) years
Include copy of State License, and Insurance.

Name of Company _____ Name of Applicant _____

Mailing Address _____ Fax Number _____

City _____ State _____ Zip _____ Business Phone _____

Check #_____ Receipt #_____ Date_____

WORK EXPERIENCE: Show practical experience in the building construction field. List at least three contractors or jobs from previous employment.

Company Name	Job Duties	Starting Date	Ending Date

Dwelling Contractor Certification (DC):_____
Number and Expiration Date

Dwelling Contractor Qualifier Certification (DCQ):_____
Number and Expiration Date

www.commerce.wi.gov/sb

_____ _____
Building Inspector Signature *Date*

State Uniform Dwelling Code Book: Dept. of Administration
Document Sales
P.O. Box 7840
Madison, Wi 53707
Call 1-608-266-3358 for current fee & postage.