

DAVIE COUNTY NORTH CAROLINA

Development & Facilities Services
336.753.6050

CONTRACTOR ID APPLICATION

INSTRUCTIONS

1. Complete this form in its entirety.
2. A copy of your current License from the state must be attached with this application.
3. Send the original form to the attention of: Cindy Binkley to our office address listed below. You may also email the form to cbinkley@daviecountync.gov or Fax to 336.751.7689
4. Once our office receives and processes the application we will send your Contractor ID# to you.
5. When requesting permits and inspections you will be required to identify yourself and provide the ID# to us. If you do not do so a permit or inspection will NOT be processed.
6. THIS WILL BE YOUR COMPANY'S ID#. DO NOT GIVE IT OUT TO ANYONE OUTSIDE YOUR COMPANY FOR YOU RISK SOMEONE FRAUDULANTLY USING YOUR LICENSE.
7. If you need to remove an approved contact person it is your responsibility to let us know so we can remove that person from your list.

DATE _____

CONTRACTOR NAME _____
(As listed with licensing board)

CONTRACTOR LICENSE NUMBER _____
(Include limitations)

Mailing Address _____

City _____ State _____ Zip _____

OFFICE NUMBER _____ FAX NUMBER _____

CELL NUMBER _____ EMAIL ADDRESS _____

NAMES OF INDIVIDUALS APPROVED TO CALL IN INSPECTIONS:

Signature of License Holder

For Office Use Only:

Processed by: _____ Date Processed _____ Contractor ID# _____

