



BUILDING DEPARTMENT

2919 Delaware Avenue, Kenmore, NY 14217

Michael D. Berns, Building Inspector

Phone: (716) 873-5700

Fax: (716) 873-0004

January 1, 2020

Re: **CONTRACTOR'S LICENSE - RENEWAL**
NOTICE OF LICENSE EXPIRATION & LICENSE RENEWAL PROCEDURE

Your Contractor's License with the Village of Kenmore will expire on December 31, 2020. If you do not renew your license you will be unable to file for permits with the Kenmore Building Department. Your license may be renewed on an "as needed" basis.

In order to renew your license, you must submit the following to this office, at the address listed above:

1. RENEWAL UPDATE FORM (enclosed)
2. PROOF OF LIABILITY INSURANCE
3. PROOF OF WORKERS COMPENSATION INSURANCE * (Form C-105)
4. PROOF OF NEW YORK STATE DISABILITY INSURANCE * (Form DB-120)
5. \$125.00 RENEWAL FEE

Please note that the Renewal Update Form must be signed in the presence of a Notary Public. Checks should be made payable to "The Village of Kenmore". For your convenience there is a Notary in this office.

If you should have any questions, please feel free to contact this office at (716) 873-5700.

Very truly yours,

KATHLEEN P. JOHNSON, Esq.
Clerk/Treasurer

- **SOLE PROPRIETORS**, who have no employees, must submit a Workers Compensation and Disability Insurance Waiver form **CE-200**. These forms can only be obtained from the New York State Compensation Board or online at www.wcb.state.ny.us
- **The CE-200 form is not available at the Village of Kenmore office.**

VILLAGE OF KENMORE

PLEASE PRINT OR TYPE

CONTRACTOR'S INFORMATION UPDATE CHECK HERE IF NO CHANGES _____

NAME OF COMPANY: _____

COMPANY ADDRESS: _____

CITY/STATE: _____ ZIP: _____

WORK PHONE: _____ FAX: _____ CELL: _____

TAX ID# OR SS#: _____

E-MAIL ADDRESS: _____

BUSINESS OWNERS NAME: _____

DATE OF BIRTH: _____

HOME ADDRESS: _____

CITY/STATE: _____ ZIP: _____

HOME PHONE: _____

FINANCIAL INSTITUTION (ESCROW ACCOUNTS) NAME & PHONE:

I hereby certify that I am familiar with the ordinance of the Village of Kenmore, and I agree not to perform any work without first obtaining a permit thereof.

I understand that any license issued to me may be suspended or revoked and that I may also be prosecuted in the event I permit persons not employed by me to perform work under my license.

I also understand that my license may be revoked or suspended if work is performed without first procuring a permit, in the event work is performed in violation of the applicable code, and/or for performing work that may contribute to the violations of the zoning ordinance.

Sworn to before me this _____
day of _____, _____

SIGNATURE

NOTARY PUBLIC

FOR OFFICE USE

Disability _____

Liability _____

W. Comp _____