

Contractor Registration Requirements

City of Portsmouth, Engineering Department 728 2nd Street, Room 25, Portsmouth, OH 45662 Phone: 740-354-7557 Fax: 740-354-5383

All contractors doing work in the city of Portsmouth MUST be registered with the Engineering Department. Requirements for registering with the City of Portsmouth are as follows:

- 1. New applicants MUST register with the City Income Tax Division before you register with the Engineering Department. 740-353-3111 - 605 Washington St., Portsmouth, Ohio.
- 2. Completed Application.
- 3. Annual fee of One Hundred Dollars (\$100.00) for the first registration plus Fifty Dollars (\$50.00) for each subsequent registration (i.e. Electrical + Plumbing = \$150). The expiration of an OCILB licensed specialty contractor registration shall coincide with the specialty license issued by the OCILB. All non-OCILB registrations must be renewed every 12 months. Failure to register shall be considered a second-degree misdemeanor. Each day that a contractor fails to register constitutes a separate offense.
- 4. Original Compliance Bond in the amount of Twenty-Five Thousand Dollars (\$25,000.00). Only required if contracted by or performing work on property owned by, the City of Portsmouth.
- 5. Certificate of Contractor's Liability Insurance in the amount of Three Hundred Thousand Dollars (\$300,000.00). When insurance expires during the year you must send a current copy.
- 6. Ohio Workers Compensation Certificate. When your certificate expires during the year for which you are registered, you <u>MUST</u> provide a current copy. If you do not carry worker's compensation, the attached sheet must be completed and notarized.
- 7. Copy of Ohio Construction Industry License if you are registering as an Electrical, Plumbing, HVAC, Refrigeration, Hydronic Piping Contractor, or Fire/Security Detection Suppression. (*Per Ohio Revised Code, you MUST provide the Engineering Department with a copy of your State of Ohio Contractors License to perform commercial work.)
- 8. I hereby apply to the City of Portsmouth Engineering Department for Contractor registration as: (check all that apply)

	RESIDENTIAL	COMMERCIAL
Electrical		*
Plumbing		*
HVAC		*
Refrigeration		* *
Hydronic, Steam, Gas		*
Fire/Security Detection & Suppression		*
General Contractor		
		*State License Required
If General, list work types		-
Business Name		
Address		
City	State	Zip Code
Telephone	Fax	
Federal Tax ID	Email	

Applicant Information

Owner/Agent:		
Address:		
City:		
Phone:	Fax:	
Statement by Applicant		
Statement of Ohio Trade or Contracto	rs License #	, Expires on
Bonding Company:		
Agent's Name:		
Address:		
City, State, Zip:		
Phone:		
Liability Insurance Company:		
Agent's Name:		
Address:		
City, State, Zip:		
Phone:		
		ents made herein are complete and accurate. Als

I hereby certify that, to the best of my knowledge and belief, all statements made herein are complete and accurate. Also, I hereby agree that the business will conform within the Rules of the City of Portsmouth and Chapter 1323 of the Codified Ordinances including all amendments thereto, relating of contracts.

Signature_____Date_____

Workers Compensation Compliance

As an employer, you are required by the State of Ohio to provide Ohio Workers' Compensation for any employees working for you. If you are **self-employed or do not have any employees** on your payroll, you are not required to carry Works' Compensation insurance. The following is to be signed and notarized and returned with your renewal application if you are **self-employed or do not have any employees**.

I HEREBY STATE, DUE TO THE FACT THAT I AM SELF-EMPLOYED AND DO NOT EMPLOY ANY ADDITIONAL PEOPLE, I AM NOT REQUIRED TO PROVIDE WORKERS' COMPENSATION IN ANY FORM.

Applicant signature: _____

Date: _____

Sworn	to before m	e, and subscribed	in my presence
this	day of		, 20

Notary Public in and for

_____ County, Ohio

My commission expires

Revision 08/30/2021

COMPLIANCE BOND

Under section 1323.04(b)(2) of the Codified Ordinances of the City of Portsmouth, this performance bond shall be required only if the OCILB Specialty Licensed Contractor is contracted to perform work or perform work on property owned by, the City of Portsmouth.

Signed, sealed and dated this ______day of ______, 20____.

THE CONDITIONS OF THE ABOVE OBLIGATION ARE SUCH THAT:

WHEREAS, the above principal has in about to apply to said City of Portsmouth for registration in accordance with chapter 1323, including all amendment thereto, of the City of Portsmouth Codified Ordinances, and;

WHEREAS, said bor	nd is issued f	or the term beginning the	_day of	, 20
and ending the	day of		_, 20	

Now therefore, the conditions of this obligation are such that if the said principal shall well and truly comply with and faithfully discharge his duties according to the terms of said ordinance, then this obligation shall be void, otherwise to be and remain in full force and effect, provided, however, that the surety may (1) cancel this bond at any time by giving thirty (30) days notice in writing by registered mail to the City of Portsmouth, Ohio, but such cancellation or termination shall not affect any liability incurred or accrued prior to the effective date of such written notice, and (2) this bond may be evidence thereof of continuation of Surety.

PRINCIPAL

SURETY

Signature

Print

Title

Address (Line 1) Address (Line 2)

Attornev-in-Fact

Phone/Fax

Revision 08/30/2021