



Contractor Registration Application

Office of Community Planning & Development
 EMAIL: permits@wbrCouncil.org • PHONE: (225) 336-2434
Jamie Hebert, Contractor Registrations
jamie.hebert@wbrCouncil.org

WBR STAFF ONLY
 Parish Registration #

Below items REQUIRED for registration:

- PARISH REGISTRATION FEE**
 - \$100
- Copies of all **CURRENT STATE LICENSES**
- Copy of **CERTIFICATE OF LIABILITY INSURANCE** showing West Baton Rouge Parish Office of Community Development as the *certificate holder*
 - Certificates must:
 - Be a minimum of **\$300,000 in GENERAL LIABILITY INSURANCE**
 - Show **POLICY NUMBER**
 - Show **EFFECTIVE DATE**
 - Show **EXPIRATION DATE**
- LIST OF ADDITIONAL APPROVED PERSONNEL** (See Page 2)
- Copy of **OCCUPATIONAL LICENSE** from West Baton Rouge if domiciled here (or from any other jurisdiction)
- Copy of **SALES AND USE TAX REGISTRATION** from West Baton Rouge Revenue
 - WBR Revenue Office (225) 336-2408
 - **THIS IS A MUST FOR ALL CONTRACTORS**
- SIGNED NOTARIZED STATEMENT** (See Page 2)
- Plumbers **(Requirements for Plumbers only)**
 - Copy of **CERTIFICATION CARD**
 - Plumbers **WITHOUT** a State of Louisiana contractor license:
 - **\$5,000 SURETY BOND**
 - In favor of the Parish of West Baton Rouge

Company Information:			
Name of Company:			
Name of person holding license	Owner:		
If any	Additional owner(s):		
Mailing Address:			
City:	State:	Zip Code:	
If different	Physical Address:		
City:	State:	Zip Code:	
Email Address(es):			
Phone Numbers	Office #:	Other #:	
Cell #:	Fax #:		



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LIST OF APPROVED PERSONNEL FOR SIGNING PERMIT APPLICATIONS:

<u>Name:</u>	<u>Contact Information:</u>

Company Owner/President Signature: _____

MUST BE NOTARIZED

I understand that the statements in this application are subject to verification. False or misleading statements may be cause for disapproval or revocation of registration and/or fines and penalties. I further certify that if I terminate my association with this company, or for any reason cease to be the qualifying party, I will notify the West Baton Rouge Office of Community Development of this fact, in writing, within thirty (30) days. I realize that a notary must witness my signature before this registration will be processed. I further understand that this registration expires on December 31st of the year that it was issued.

On this day of _____, 20 _____, I certify that the foregoing is true and correct.

Qualifying Party Signature: _____

Notary Signature: _____ **Date:** _____

Notary License Number: _____

Notary Commission Expiration Date: _____