

CITY OF TECUMSEH
309 E. CHICAGO BLVD. PO BOX 396 TECUMSEH, MI 49286
517.424.6547
buildingservices@tecumsehmi.gov



Building Services
Contractor Registration Form
Fee - \$20.00

Company Name: _____

Street Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Business Phone: _____

Cell: _____

Company Email: _____

Company Contact: _____

Licensee Name: _____

Contractor Federal ID Number: _____

Please provide the following documents for registration:

- 1. STATE/COUNTY LICENSE**
- 2. WORKMANS COMPENSATION INSURANCE**
- 3. GENERAL LIABILITY INSURANCE**
- 4. COPY OF DRIVER'S LICENSE**

All requested documents must be current and legible. Any missing information will delay registration. Please send all documents to : buildingservices@tecumsehmi.gov