Marathon Township

Marathon Township Building Department · 4574 Pine Street · PO Box 457 · Columbiaville, MI 48421 Ph: 810·793·2002 · Fax: 810·793·8844 · www.marathon.mi-twp.org

Construction Contractor Registration

	Constructi	on Co	ontractor Registra	เเงแ	
Name of Contractor			Name of Firm		
Mailing Address			Mailing Address		
City State Zip			City	State Zip	
Phone			Phone		
TYPE OF LICENSE					
\square Building	\Box Plumbing		\square Mechanical	☐ Electrical	
Contractor License Number			Workers Compensation Carrier::		
Expiration Date of License			(or reason for exemption):		
			Employer Identification Number:		
Drivers License Number			Employer Identification Number:		
Drivers License Number			(or reason for exemption):		
PLUMBING ONLY:			Michigan Employment Security Commission Employer Number:		
Provide Master License Number & Expiration:					
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Please enclose a copy of Contractor License and Drivers License with this application. For Plumbing Permits, a copy of the master					
License is also required. If someone other than the contractor is applying for permits, a signed statement of authorization from the					
licensed contractor designating this person as his/her agent is required.					
Section 23a of the State Construction Code Act of 1972, Act No. 230 of the Public Acts of 1972, being Section 124.1523a of the					
Michigan Compiled Laws, prohibits a person from conspiring to circumvent the licensing requirements of the state relating to per-					
sons who are to perform work on a residential building or a residential structure. Violators of Section 23a are subject to civil to					
Applicant Signature:			Date:		
DO NOT WRITE BELOW THIS LINE – TOWNSHIP USE ONLY					
Application Fee	Date Received	Receipt	Number	Copies Received:	
				☐ Contractor License	
Additional Information				- Contractor License	
Additional Information:				☐ Drivers License	
			☐Master License		
				(Plumbing	
				(i lambing	