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CONTRACTOR REGISTRATION AND RENEWAL FORM

Division of Building and Permits
65 Water Street Aurora IL 60505
Ph: (630) 892-8088 Fx: (630) 892-8112

FENCE Contractor _____

DRIVEWAY Contractor _____

Select only one contractor type per Registration

PLEASE TYPE OR PRINT

DATE _____

BUSINESS NAME _____

APPLICANT NAME _____

(PLEASE PRINT)
MAILING ADDRESS _____

STREET

CITY/STATE

ZIP

BUSINESS TELEPHONE _____ FAX _____

CELL NUMBER _____ E-MAIL _____

SIGNATURE _____

**Please provide a business card when registering.
Registration is valid for one year.**