



Municipality of Norristown
 Department of Building & Code Enforcement
 235 E Airy Street, Norristown, PA 19401
 Phone: (610) 270-0441 Fax (610) 279-7548

For Office Use Only	
Application Received _____	Paid: _____
RS#: _____	Cash/Check # _____
License #: _____	

Contractor Registration Application

****Home Improvement Contractors, please provide a copy your state license****

Contractor registration will be issued only if the following is present and up to date at the time of registration:
 The applicant must be able to prove financial responsibility by furnishing a Certificate of Insurance as evidence of valid Workers Compensation. Public Liability Insurance in the amount of five hundred thousand dollars (\$500,000.00) and damage insurance in the amount of one hundred thousand dollars (\$100,000.00). The Certificate of Insurance must name the Municipality of Norristown as the Certificate holder. The necessary information should be submitted at the time of registration.

The fee for registration in the Municipality is dependent on when the contractor registration was applied for. The contractor registration fee for the period between **January 1 - March 31 is \$100, between April 1 - June 31 is \$75, between July 1 - September 31 is \$50, and between October 1 - December 31 is \$25. Postmarked applications will be accepted for before or the date of. Please make all checks/money orders payable to the Municipality of Norristown. Any further information can be found in Ordinance 99-13, General Building of Contractors Ordinance. Licenses run by calendar year and must be renewed every year.**

Please check the license types you are applying for:

- | | | | |
|---|---|--------------------------------------|--------------------------------------|
| <input type="checkbox"/> Master Plumber | <input type="checkbox"/> Master Electrician | <input type="checkbox"/> Master HVAC | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> General | <input type="checkbox"/> Fire | <input type="checkbox"/> Chimneys | _____ |

Type of Work Business Performs: _____

Business Name: _____

Business Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Business Fax: _____

Business Email: _____

PA State License #: _____

Business Privilege License Number: _____

Federal Tax ID Number: _____

I hereby certify that all installations, alterations, repairs and materials, assemblies and equipment utilized in connection therewith shall be in conformity with all Municipality of Norristown applicable codes, ordinances, regulations and relevant state statues or regulations. No work may be performed until a permit has been secured. I understand that a license can be revoked for failure to maintain the necessary insurance requirements and for failure to comply with all other requirements under Chapter 251.

Name of Applicant: (Please Print) _____

Applicant Signature: _____

Municipality of Norristown

Workers Compensation Insurance Coverage Information

A. The applicant is:

A contractor within the meaning of the Pennsylvania Workers Compensation Law.

YES

NO

If the answer is "YES" complete section B and C below as appropriate.

B. Insurance Information:

Name of Applicant: _____

Federal or State Employer Identification No. _____

Applicant is a qualified self-insurer for Workers Compensation _____ Certificate Attached

Name of Workers Compensation Insurer _____ Certificate Attached

Policy Expiration Date _____

C. Exemption: *(Please complete this section if the applicant is a contractor claiming exemption from providing Workers Compensation Insurance).*

The undersigned swears or affirms that he/she is not required to provide Workers Compensation Insurance under the provisions of the PA Workers Compensation Law for one of the following reasons as indicated:

Contractor with no employees. Contractor prohibited by law from employing any individual to perform work pursuant to this building permit unless contractor provides proof of insurance to the Municipality.

Religious exemption under the Workers Compensation Law.

Commonwealth of Pennsylvania

County of Montgomery

Subscribed and sworn to be me this

_____ day of _____, 20____

Signature of Notary Public

My Commission expires _____

Print Name _____

Signature _____

Address _____

City _____ State _____ Zip _____

County of _____

Municipality of _____



Municipality of Norristown

Department of Building & Code Enforcement

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To: Building Permit Applicants and Contractors
From: Department of Building & Code Enforcement
Subject: Workers' Compensation Reform Act (Act 44 of 1993)

As required by the Pennsylvania Workers' Compensation Reform Act 44 of 1993, any building permit issued to a property owner, contractor or subcontractor must demonstrate current coverage and compliance with the Workers' Compensation Act. As proof of Insurance under this Act, one of the following must be submitted with the Building Permit Application:

1. Certificate of Insurance issued by their insurance carrier as proof of Workers' Compensation Insurance for their employees; or
2. Certification of State-approved Self-Insurance from the Department of Labor and Industry; or
3. Notarized affidavit of exemption from Workers' Compensation Insurance coverage stating they are not required to provide coverage for one of the following reasons:
 - The property owner is performing their own work.
 - The contractor has no employees.
 - The employees of the contractor are exempt from Workers' Compensation Insurance Coverage for religious reasons

All contractors and subcontractors must provide with the Building Permit Application the following information, including: contractor name; address; contact person, and federal or state employer identification number. Contractors and subcontractors will also be required to submit an affidavit attesting that they are in compliance with the Act.

Contractors that employ individuals that claim a religious exemption under Workers' Compensation Law, must attach a copy of each employees Certification of Religious Exception Form LIBC-14C from the Department of Labor & Industry, Bureau of Workers' Compensation. This form must be submitted for each employee claiming this exemption.

For property owners performing their own work, it will be necessary that a notarized affidavit of exemption from workers' compensation insurance be submitted with the Building Permit Application. This affidavit must state that no persons will be hired/employed, or that no work will be contracted or subcontracted on the construction project that falls under the scope of the Building Permit. However, should the property owner later choose to hire a contractor or subcontractor to complete any work on the construction project, it will be the responsibility of the resident to see that the contractor or subcontractor comply with the regulations outlined above and proof of such be furnished to the Department of Building & Code Enforcement.

The certificate and/or affidavit shall be kept on file with the Municipality of Norristown's copy of the building permit. With the issuance of the building permit, the Municipality of Norristown shall be named as a workers' compensation policy certificate holder. An insurer issuing a policy shall be required to notify the Municipality of Norristown of an expiration or cancellation of any policy certificate within three working days of such expiration or cancellation.

Upon receiving actual notice that the contractor's/subcontractor's workers' compensation insurance or State-approved self-insured status has been cancelled, the Municipality of Norristown shall issue a stop work order to a contractor/subcontractor who is performing work pursuant to a building permit. Also, if the Municipality of Norristown receives actual notice that a contractor or property owner, having filed an affidavit of exemption from workers' compensation insurance, has hired persons to perform work pursuant to a building permit and does not maintain required workers' compensation insurance, the Municipality of Norristown shall issue a stop work order. The order shall remain in effect until proper workers' compensation coverage is obtained for all work performed pursuant to the building permit.

Nothing in the Workers' Compensation Act shall be the basis of any liability on the part of the Municipality of Norristown. It is not the Municipality of Norristown's responsibility to notify any contractor/ subcontractor and/or resident that workers' compensation insurance has expired or been cancelled, nor shall the Municipality of Norristown incur liability for any damage which may result from the issuance of a stop work order.

Questions concerning Workers' Compensation Insurance coverage requirements as they pertain to building permits should be directed to the Municipality of Norristown's Department of Building & Code Enforcement.