

**THE CITY OF YOUNGSTOWN**  
**REGISTRATION OF SPECIALTY CONTRACTORS**

**All Heating, Ventilation, Air Conditioning, Refrigeration, Electrical, or Hydronics Contractors (Specialty Contractors) wishing to do business in the City of Youngstown**

**Definition of Specialty Contractor**

All heating, ventilating, and air conditioning contractor, refrigeration contractor, electrical contractor, or hydronics contractors, as those terms are defined in section 4740.01 of the Ohio Revised Code.

**Application Requirements**

**\*All City license for the above trades will expire on December 31<sup>st</sup>, of the current year. Any specialty contractor who wishes to continue to do business in the City must comply with the registration requirements as set forth in Ordinance 01-394. These requirements include the following**

- a. Completed Application; and
- b. Contractor's Bond Form, executed by an authorized surety, furnished by the City (\$10,000.00); and
- c. Certification of Liability Insurance (\$300,000.00 minimum for bodily injury, and \$100,000.00 property damage); and
- d. Copy of State of Ohio Worker's Compensation Certificate; and
- e. \$100.00 initial fee or \$50.00 renewal fee; and
- f. Copy of your valid and unexpired specialty contractor's license issued by the State of Ohio pursuant to O.R.C. 4740; or
- g. Proof that the specialty contractor has passed a qualified examination in such trade that is subject to the approval of the City's Chief Enforcement Officer or his designee.

A separate registration will be required for each type of work indicated on the Application. One Bond and Insurance Certification may be used for multiple registration as long as it is indicated on the bond and insurance certificate.

A specialty contractor's registration is not transferable, but the registration of any member, officer or supervisory employee of a firm or corporation shall be sufficient to qualify the firm or corporation to engage in the business under registration. If a member, officer, or supervisory employee of a firm or corporation represents more than one firm or corporation, a separate registration must be secured and maintained for each said firm or corporation.

**Please have all necessary information attached to the application when submitting for registration**

Applications may be obtained on the Fifth Floor of Youngstown City Hall from 8:00 am to 3:30 pm, Monday thru Friday or can be downloaded from our website, located at [youngstownohio.gov](http://youngstownohio.gov), under the Building Inspections forms.

Registration can be processed in person or by mail. Please submit your check, along with a completed application, bond, certificate of insurance, worker's compensation certificate, and Ohio specialty license to the address below:

Bureau of Building Code Administration  
Building Department – Fifth Floor  
26 S. Phelps Street  
Youngstown, Ohio 44503

\*Checks shall be made payable to The City of Youngstown\*

# Building Inspection

A Division of The Department of  
Public Works  
City of Youngstown  
26 S. Phelps St – 5<sup>th</sup> Floor  
Youngstown, Ohio 44503  
330-742-8890  
Fax: 330-742-8807

## APPLICATION FOR SPECIALTY CONTRACTOR'S REGISTRATION

Indicate by check mark:

- Initial Application - \$100.00  
 Annual Renewal - \$50.00

(Please type or print clearly in ink)

Applicant's Name \_\_\_\_\_ Date \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Date of Birth \_\_\_\_\_ Citizen of \_\_\_\_\_ Phone \_\_\_\_\_

Social Security Number \_\_\_\_\_ E-mail \_\_\_\_\_

Name of Firm, Corporation, or other business entity for whom you work in this trade:

Business Name \_\_\_\_\_

Business Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name(s) of Owner(s), Partners, or Officers \_\_\_\_\_

If a corporation: Date of incorporation \_\_\_\_\_ State of incorporation \_\_\_\_\_

Name and address of Registered Agent for service \_\_\_\_\_

Business Phone \_\_\_\_\_ Federal ID Number \_\_\_\_\_

Will the Firm, Corporation, or other business entity listed above be operating under your registration? \_\_\_\_\_

I do hereby make application for the following registration as checked or marked below: (One Application per trade)

( ) HVAC Contractor ( ) Refrigeration Contractor ( ) Electrical Contractor ( ) Hydronics Contractor

### REQUIRED SUBMITTALS

1. Liability Insurance (attach); and  
A certificate of insurance evidencing that the applicant has insurance for bodily injury in at least the amount of \$300,00.00, and for property damage in at least the amount of \$100,000.00. Each such insurance policy shall carry an endorsement which requires that the City be provided with at least thirty (30) day written notice in the event that such insurance is to be cancelled or not renewed for any reason.
2. Bond (attach); and  
On Form as provided by the City.
3. State of Ohio Workers Compensation Certificate (attach); and
4. State License O.R.C 4740 (attach); or
5. Proof of passage of a qualified examination (subject to City approval) (attach).

**INFORMATION**

Applicant must answer all of the following questions. If no answer is applicable, indicate "N/A".

1. What experience do you or the principal individuals of your present organization have in the respective trade?

Name of Individual	Position	Years Experience	In What Trade/Capacity
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2. How many years has your organization been in business under your present business name? \_\_\_\_\_

3. How many years of experience does your organization have in this trade? \_\_\_\_\_

4. List three (3) projects in this trade that you or your organization have completed within the last two (2) years.

Year	Type of Work	Contract Amount	Location of Job & for Whom
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

5. Have you or has your firm ever failed to complete any work awarded to you? \_\_\_\_\_

6. If so, where and why? \_\_\_\_\_  
(Use extra sheets if needed)

7. Has any officer or partner of your organization ever failed to complete a contract handled in his own name? \_\_\_\_\_

8. If so, state the name of the individual, name of owner and reason therefore. \_\_\_\_\_  
(Use extra sheets if needed)

The undersigned does hereby certify the accuracy of the submitted information.

Signature \_\_\_\_\_ Business Name \_\_\_\_\_ Date \_\_\_\_\_

**NOTICE**

No person, firm or corporation shall engage in, contract for or represent him or herself as being a specialty contractor within the City of Youngstown without first receiving registration in such trade from the City of Youngstown. Any person found violating this ordinance shall be guilty of a misdemeanor of the fourth degree. In addition to other penalties, registration may be denied or revoked for misrepresentation of a material fact by the applicant in obtaining registration or renewal thereof: Use of registration in obtaining permits for another person: Faulty or defective workmanship; Departure from or disregard of plans and specifications filed with the application for a permit; Failure to maintain a bond, insurance, worker's compensation, or other requirements of registration; and Non-compliance with or violation of the City's building code, ordinances, or other rules codes or regulations of the City. **ALL REGISTRATION FEE ARE NON-REFUNDABLE**

For Internal Use Only: Workers Comp on File: \_\_\_\_\_ Fee Collected \_\_\_\_\_

Application Complete: \_\_\_\_\_ Registration #: \_\_\_\_\_

Bond on File: \_\_\_\_\_ Date Registration Issued: \_\_\_\_\_

Cert of Insurance on File: \_\_\_\_\_ License/approved test on file: \_\_\_\_\_

Chief Building Official/Designee \_\_\_\_\_ Date: \_\_\_\_\_