



VILLAGE OF CHANNAHON

24555 S. NAVAJO DRIVE • CHANNAHON, ILLINOIS 60410
(815) 467-6644 • FAX (815) 467-9774 • www.channahon.org

INSTRUCTIONS FOR CONTRACTOR REGISTRATION

WHO MUST REGISTER:

All contractors desiring to engage in business within the Corporate Limits of the Village of Channahon must be registered with the Development Department.

EFFECTIVE DATES OF REGISTRATION:

All registrations expire one year from the date of registration.

REGISTRATION FEES:

General Contractor	\$150.00
All other Contractors	\$100.00

INSURANCE REQUIREMENTS:

Certificate of Insurance must list the Village of Channahon as the Certificate Holder.

Bodily Injury Liability	\$300,000
Property Damage Liability	\$100,000
Workmen's Compensation	As required by the Industrial Commission of Illinois

If insurance expires during the term of registration, a renewal certificate must be mailed to the Development Department or the registration will be suspended.

CONSTRUCTION START AND STOP TIMES:

All construction activities within 1,000 feet of any occupied residential structure shall be allowed only between the following hours:

Monday -- Friday:	7:00 a.m. – 9:00 p.m.
Weekends:	7:30 a.m. – 9:00 p.m.

Roofing work may begin one hour earlier

Exempt construction activities include those associated with emergency construction or maintenance activities or those associated with public works construction projects undertaken by the state or any political subdivision thereof. Ordinance #1370:12/20/04



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CONTRACTOR REGISTRATION

Please print or type

Business Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Office: (____) _____ Cell: (____) _____ Fax: (____) _____

Applicant's Name: _____

(Please check one)

Partnership _____ Sole Ownership _____ Corporation _____ Other _____

Type of Contractor: _____ No. of Employees _____

Other Cities Licensed or Registered in: _____

Illinois State License # _____ Plumbers, Roofers and all other contractors required to be registered with the State of Illinois, must provide a copy of their State License.

Plumbing Contractors: Please list all names and XC numbers of plumbers employed by you that are CCCDI approved.

Insurance Agent: _____

General Liability: _____ Phone: (____) _____

Workers Compensation: _____ Phone: (____) _____

I understand the Village of Channahon building codes and inspection requirements.

SIGNED: _____

REGISTRATION NUMBER _____