

# CITY OF BLAIR

218 S. 16<sup>th</sup> Street  
Blair, NE 68008  
(402) 426 4191 FAX: (402) 426 4195  
Email: [building@blairne.gov](mailto:building@blairne.gov)

<b>FOR OFFICE USE ONLY</b>
Date Paid: _____
Receipt No: _____
Check# or CC _____
Amount Paid: _____

## CONTRACTOR REGISTRATION/LICENSE RENEWAL

(Please type or print in ink – If you need more space, please attach additional sheets)

**Application is for: Journeymen/Apprentice - \$35.00 each**

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

Master's Name: \_\_\_\_\_

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

Phone #: \_\_\_\_\_ Mobile #: \_\_\_\_\_

**Please List all employees that you wish to register and check the appropriate boxes.**

Name	Plumber	Heater	Electrician	Apprentice	Journeyman
_____	<input type="checkbox"/>				
_____	<input type="checkbox"/>				
_____	<input type="checkbox"/>				
_____	<input type="checkbox"/>				
_____	<input type="checkbox"/>				
_____	<input type="checkbox"/>				
_____	<input type="checkbox"/>				
_____	<input type="checkbox"/>				
_____	<input type="checkbox"/>				

All information contained in this application is true and correct. I will notify the City of Blair of any changes in the information reported on or with this application form within 15 days of the change.

I hereby make application to the Licensing Board of Blair, Nebraska and certify that I am competent and experienced to engage in above said vocation. I agree to conform strictly to the Ordinances of the City of Blair, Nebraska relative to said vocation and obey all order, requirements and regulations of its lawful constituted authorities. This certification applies to the original license and/or registration and any renewals thereof.

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Date