



OFFICE OF PUBLIC SERVICES

**Contractor's Business License (CBL) Application**

Type of Contractor's License:

General       Electrical       Mechanical       Plumbing       Sign       Blasting

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Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Office Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Applicant Title: \_\_\_\_\_

Email Address: \_\_\_\_\_

- A fee of \$50.00 shall accompany this application.
- A Certificate of Insurance naming the City of Crestwood as the certificate holder is requested. Home owners who require a CBL for work, do not have to provide a Certificate of Insurance.
- No person, contractor, or contracting firm shall commence business without first applying at the Department of Public Works, and obtaining a license to conduct such business.
- Mechanical, Electrical, Plumbing, and Blasting contractors shall have a St. Louis County License:  
St. Louis County License #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_
- A contractor's business license shall be valid from January 1st until December 31st of said year.
- The City reserves the right to revoke any such license, at any given time during the licensing period.

I declare that this application is true and correct to the best of my knowledge.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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**OFFICE USE ONLY**

*Date Approved*

City Clerk/Administration: \_\_\_\_\_

Public Works Department: \_\_\_\_\_

|                        |       |
|------------------------|-------|
| <b>Payment Section</b> |       |
| License #:             | _____ |
| Date:                  | _____ |
| Amount Paid:           | _____ |
| Receipt #:             | _____ |
| CBL:                   | _____ |